

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90041 050 ***150.00

DOCUMENT # **P01000097249**

1. Entity Name
JOHN & MARY'S SWEETWATER CAFE' INC. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3850 E. GULF TO LAKE HWY

3. Mailing Address
3850 E GULF TO LAKE HWY

DO NOT WRITE IN THIS SPACE

City & State INVERNESS FL		City & State INVERNESS FL		4. FEI Number 59-3748340	Applied For <input type="checkbox"/> Not Applicable
Zip 34453	Country USA	Zip 34453	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **MARY A. BRYANT**

Street Address (P.O. Box Number is Not Acceptable)
3850 E GULF TO LAKE HWY

City **INVERNESS FL** Zip Code **34453**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Mary A Bryant* DATE **4-30-02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P BRYANT, MARY A. 2924 CLEARWOOD ST INVERNESS FL 34452	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary Bryant* **MARY A BRYANT** 4-30-02 3527267670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #