

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-19-2004 90037 040 ***150.00

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1. Entity Name
DAVID'S CATFISH HOUSE OF SRC, INC.



Principal Place of Business

**5129 DOGWOOD
MILTON, FL 32570**

Mailing Address

**5129 DOGWOOD
MILTON, FL 32570**

66408370



DO NOT WRITE IN THIS SPACE

03132004 No Chg-P CR2E034 (10/03)

4. FEI Number
01-0661557

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WESTMORELAND, J L
220 WEST GARDEN STREET
SUN TRUST TOWER 9TH FL
PENSACOLA, FL 32501**

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Doug Brauneck* President 3-15-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PST
BRAUNECK, DOUG
3960 OVERLOOK CIR.
PACE, FL 32571**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
WILSON, SID
5016 ROLAND RD.
PACE, FL 32571**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Doug Brauneck* DOUG BRAUNECK 3-27-04 850-626-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #