

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90070 026 \*\*\*150.00

DOCUMENT # P92000014058

1. Corporation Name

SUBWAY OF ELLISVILLE, INCORPORATED

Principal Place of Business

RT 2, BOX 6011

LAKE CITY FL 32024

US

Mailing Address

RT 2, BOX 6011

LAKE CITY FL 32024

US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/93

4. FEI Number

59-3153767

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☒

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

26 3131 NW 13th ST

Suite, Apt. #, etc.

27 SUITE # 5

City & State

28 GAINESVILLE FL

Zip

29 32609-2177

Country

30 US

Suite, Apt. #, etc.

City & State

Zip

Country

25

9. Name and Address of Current Registered Agent

LESTOCK, JAMES J.

RT 2, BOX 6011

LAKE CITY FL 32024

10. Name and Address of New Registered Agent

81 Name

LONALD D. HARTWELL

82 Street Address (P.O. Box Number is Not Acceptable)

1830 SW 44TH AVENUE

83

84 City

GAINESVILLE

FL

85 Zip Code

32608-4062

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Lonald D. Hartwell* - LONALD D. HARTWELL, Sec/Treas

(NOTE: Registered Agent signature required when reinstating)

4/28/99  
DATE

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME LESTOCK, JAMES J.

STREET ADDRESS 4 ST. JAMES AVE

CITY-ST-ZIP LAKE CITY FL 32025

TITLE VT ☐ DELETE

NAME LESTOCK, NANCY A

STREET ADDRESS 4 ST. JAMES AVE

CITY-ST-ZIP LAKE CITY FL 32025

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

SID

☒ Change

☐ Addition

1.2 NAME

LONALD D. HARTWELL

1.3 STREET ADDRESS

1830 SW 44TH AVENUE

1.4 CITY-ST-ZIP

GAINESVILLE, FL 32608-4022

2.1 TITLE

VD

☒ Change

☐ Addition

2.2 NAME

DAVID M. HARTWELL

2.3 STREET ADDRESS

25722 SW 18th AVENUE

2.4 CITY-ST-ZIP

NEWBERRY, FL 32669

☒ Change

☒ Addition

3.1 TITLE

PD

3.2 NAME

CHRISTOPHER A. HARTWELL

3.3 STREET ADDRESS

9525 SW 75TH STREET

3.4 CITY-ST-ZIP

GAINESVILLE, FL 32608

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13, as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lonald D. Hartwell* - LONALD D. HARTWELL, Sec/Treas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99  
Date

(352) 395-6632  
Daytime Phone #

CR2E034 (11/98)