

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

DOCUMENT # P93000005780

1. Corporation Name

GOOD N' NATURAL EATERY II, INC.

Principal Place of Business

1800 W. HIBISCUS BLVD.
STE. 105
MELBOURNE FL 32901

Mailing Address

1800 W. HIBISCUS BLVD.
STE. 105
MELBOURNE FL 32901

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

27

Suite, Apt. #, etc.

23

28

City & State

24

29

Zip

25

30

Country

26

27

Country

9. Name and Address of Current Registered Agent

WHITTINGTON, SARAH H
1800 W. HIBISCUS BLVD.
STE. 105
MELBOURNE FL 32901

81 Name

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

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

TITLE

P

NAME

WHITTINGTON, SARAH H

STREET ADDRESS

1800 W. HIBISCUS BLVD. STE. 105

CITY-ST-ZIP

MELBOURNE FL 32901

1.1 TITLE

Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sarah H. Whittington

FILED
Mar 08, 1999 8:00 am
Secretary of State

03-08-1999 90110 002 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/21/1993

4. FEI Number

59-3160926

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes

No

CR2E034 (11/98)