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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000008861 GRAPEVINE CATERING, INC.

FILED Apr 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 4059 S. HWY 17-92 4059 S. HWY 17-92 CASSELBERRY FL 32707 CASSELBERRY FL 32707 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/01/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3162066 Not Applicable Suite Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Z₁p Country Zip 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRIDGWATER, NEAL H 1605 PINEHURST DR. Street Address (P.O. Box Number is Not Acceptable) CASSELBERRY FL 32707 83 84 City Zip Code 85 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Addition DELETE Change 1 1 TITLE TITLE CRISWELL, BETSY B NAME 1.2 NAME 415 EAGLE CIR STREET ADDRESS 1.3 STREET ADDRESS CASSELBERRY FL 1.4 CITY - ST - ZIP CITY - ST - ZIE DELETE Change Addition 2.1 TITLE TITLE BRIDGWATER, JENNIFER S 2.2 NAME NAME 1605 PINEHURST DR 2.3 STREET ADDRESS STREET ADDRESS CASSELBERRY FL CITY - \$1 - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE CRISWELL, RICHARD E 3.2 NAME NAME 415 EAGLE CIR STREET ADDRESS 3.3 STREET ADDRESS CASSELBERRY FL 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE BRIDGWATER, NEAL H 4. 2 NAME 1605 PINEHURST DR 4.3 STREET ADDRESS STREET ADDRESS CASSELBERRY FL CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP ... DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS

14. 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, of in an attachment with a ratifices.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

4-13-98

402-260-0020

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