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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000039074 (8)

FILED Feb 12 1998 8:00am Secretary of State

MILK & HONEY, INC. Principal Place of Business Mailing Address 120 EDGEWOOD TERRACE P.O. BOX 1646 SANTA ROSA BEACH FL 32459 SANTA ROSA BEACH FL 32459 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/26/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3175753 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζφ Country Zφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. 24 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HELLER, DONALD J 3696 BAY GROVE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) FREEPORT FL 32439 83 City 85 Zip Code 64 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or proted non-erof registered agent and title if applicat (NOTE: Registered Agent signature requ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change DELETE Addition 1.1 TITLE TITLE HELLER, DONALD J NAME 1.2 NAME 3696 BAY GROVE ROAD STREET ADDRESS 1.3 STREET ADDRESS FREEPORT FL 32439 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 21 TITLE TITLE NAME HELLER, RICHARD C 22 NAME 3696 BAY GROVE ROAD 23 STREET ADDRESS STREET ADDRESS FREEPORT FL 32439 CITY-ST-ZIP 2.4 CHTY-ST-ZIP DELETE Change Addition TITLE 3.1 THILE HELLER, DANIEL G NAME 3.2 NAME 3696 BAY GROVE ROAD STREET ADDRESS 3.3 STREET ADDRESS FREEPORT FL 32439 CITY - ST - ZIP 3.4. CITY - ST - ZIP DELF TE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREE1 ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 Juceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

or the decenter of musing components in a selection of the selection of th SIGNATURE