

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 10: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000072141 (3)

1. Corporation Name

PURE COUNTRY STEAK OUT, INC.

Principal Place of Business

**6424 14TH ST. WEST
BRADENTON FL 34207**

Mailing Address

**6424 14TH ST. WEST
BRADENTON FL 34207**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/11/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0447876

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 has liability for intangible tax under S. 189.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SPOTO, PETER M
6424 14TH ST. WEST
BRADENTON FL 34207**

81. Name

CLIFFORD HANEY SR.

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

6424 - 14th ST WEST

83.

84. City

BRADENTON

FL

85. Zip Code

34207

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

Clifford W. Haney Sr.

(NOTE: Registered Agent signature required when reappointing)

DATE

3-10-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	SPOTO, PETER
STREET ADDRESS	6424 14 ST W
CITY - ST - ZIP	BRADENTON FL
TITLE	VP
NAME	SPOTO, LORRIANE
STREET ADDRESS	6424 14 ST W
CITY - ST - ZIP	BRADENTON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	CLIFFORD HANEY SR	
1.3 STREET ADDRESS	6424 - 14th ST W	
1.4 CITY - ST - ZIP	BRADENTON FL 34207	
2.1 TITLE	VP/S/T	☒ Change ☐ Addition
2.2 NAME	LINDA HANEY	
2.3 STREET ADDRESS	6424 - 14th ST W	
2.4 CITY - ST - ZIP	BRADENTON FL 34207	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Clifford W. Haney Sr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-95

Date

739-0526

Daytime Phone #