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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # P93000073631

1. Corporation Name

COTTON & QUAIL ENTERPRISES, INC.

Principal Place of Business  
205 EAST WASHINGTON STREET  
MONTICELLO FL 32344

Mailing Address  
150 W. BRAMBLETON AVE  
NORFOLK VA 23510  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1993

4. FEI Number

59-3240110

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

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME SPEARS, RICHARD F.  
STREET ADDRESS 150 W. BRAMBLETON AVE  
CITY-ST-ZIP NORFOLK VA 23510

TITLE VP ☐ DELETE

NAME MCKENZIE, PRESTON  
STREET ADDRESS 150 W. BRAMBLETON AVE  
CITY-ST-ZIP NORFOLK VA 23510

TITLE SD ☐ DELETE

NAME RYAN, LOUIS F.  
STREET ADDRESS 150 W. BRAMBLETON AVE  
CITY-ST-ZIP NORFOLK VA 23510

TITLE AS ☐ DELETE

NAME SMITH, SUSAN D.  
STREET ADDRESS 150 W. BRAMBLETON AVE  
CITY-ST-ZIP NORFOLK VA 23510

TITLE D ☐ DELETE

NAME WYNNE, JOHN O.  
STREET ADDRESS 150 W. BRAMBLETON AVE  
CITY-ST-ZIP NORFOLK VA 23510

TITLE D ☐ DELETE

NAME BARRY, RICHARD F. I  
STREET ADDRESS 150 W. BRAMBLETON AVE  
CITY-ST-ZIP NORFOLK VA 23510

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

6.1 TITLE

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: Susan D. Smith  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)