## 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 # P93000075457

1. Corporation Name

CHARLIE WARREN PIPPIN, INC.

Principal Place of Business

Mailing Address

## **FILED** Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90272 045 \*\*\*150.00



253 EASTPOINT COURT SPRING HILL FL 34606			DO NOT WRITE IN THIS SPACE		HIS SPACE	
				3. Date Incorporated or Qualifed 10/22/1993	•	
2a. Mailing Add	ress			4. FEI Number	Applied For	
26			l	<b>59-3215883</b>	Not Applicable	
Suite, Apt. i	#, etc			5. Certificate of Status Desired	\$8.75 Additional ===	
City & State	•			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip		try			Intangible .  ☐ Yes ☐ No	
				10. Name and Address of New Registered Agent		
TO BISTORE A SECTION		31 N	lame			
	[	82 5	Street Addres	ss (P.O. Box Number is Not Acceptable)		
	-	83				
		84 (	City		L 85 Zip Code	
	2a. Mailing Add 26  — Suite, Apt. i 27  City & State 28  Zip 29	SPRING HILL FL 34606    Za. Mailing Address   Z6  Suite, Apt. #, etc 27   City & State   Z8   Zip   Coun   Z9   30   State   Coun   Z9   Coun	SPRING HILL FL 34606  2a. Mailing Address 26 Suite, Apt. #,.etc 27  City & State 28  Zip Country 29 30  rrent Registered Agent  81 N 82 S	SPRING HILL FL 34606    2a. Mailing Address   26   Suite, Apt. #.etc   27   City & State   28   Zip   Country   29   30   Country   29   Street Address   81   Name   82   Street Address   83   Street Address   84   Street Address   85   Street Address   85	SPRING HILL FL 34606  DO NOT WRITE IN THE 3. Date Incorporated or Qualifed 10/22/1993  2a. Mailing Address 26  Suite, Apt. #, etc	

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: R	egistered Agent signature re	souired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PIPPIN, CHARLIE W	1.2 NAME	
STREET ADDRESS	253 EASTPOINT COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL 34606	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	الراز والكرومين والمعاج يبعد والرازي الرازان المراجب المستعدد
CITY-ST-ZIP		2. 4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	•
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADORESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	·
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
14 I hereby o	pertify that the information supplied with this filing does not qualify for the	he 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:

NAME OF SIGNING OFFICER OR DIRECTOR