

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathias
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000013460 (8)

1. Corporation Name

CYPRESS GARDENS BEVERAGE CASTLE, INC.

Principal Place of Business
3006 CYPRESS GARDENS RD.
WINTER HAVEN FL 33884

Mailing Address
3006 CYPRESS GARDENS RD.
WINTER HAVEN FL 33884

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/17/1994
3a. Date of Last Report

4. FEI Number 59-3225204
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. 193.032, Florida Statutes ☒ 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

MANCHESTER, DAVID
3006 CYPRESS GARDENS RD.
WINTER HAVEN FL 33884

01 Name Randolph C. Lane
02 Street Address (P.O. Box Number is Not Acceptable)
3096 Cypress Gardens Rd.
03 Winter Haven, FL.
04 City FL 33884

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

Randolph C. Lane PRESIDENT

4-24-95

Signature typed or printed name of registered agent, and fee if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME MANCHESTER, DAVID
STREET ADDRESS 4012 CYPRESS LANDING SOUTH
CITY - ST - ZIP WINTER HAVEN FL 33884

11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS DELETE
14 CITY - ST - ZIP

TITLE DT
NAME MANCHESTER, JOANNE
STREET ADDRESS 4012 CYPRESS LANDING SOUTH
CITY - ST - ZIP WINTER HAVEN FL 33884

21 TITLE ☒ Change ☐ Addition
22 NAME
23 STREET ADDRESS DELETE
24 CITY - ST - ZIP

TITLE DV
NAME LANE, RANDOLPH C
STREET ADDRESS 145 LAGOON RD.
CITY - ST - ZIP WINTER HAVEN FL 33884

31 TITLE ☒ Change ☐ Addition
32 NAME DP
33 STREET ADDRESS
34 CITY - ST - ZIP

TITLE DS
NAME LANE, CAILEY J
STREET ADDRESS 145 LAGOON RD.
CITY - ST - ZIP WINTER HAVEN FL 33884

41 TITLE ☒ Change ☐ Addition
42 NAME DV
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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)(a), 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, unchanged, or on an attachment with an address.

SIGNATURE:

Randolph C. Lane
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RANDOLPH C. LANE

4-24-95 (8/3) 396.1111