

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Jul 09 1998 8:00am
Secretary of State

DOCUMENT # **P94000024004 (1)**

1. Corporation Name

CARROT COUNTRY, INC.



Principal Place of Business

**616 OAKFIELD DR.
BRANDON FL 33511**

Mailing Address

**616 OAKFIELD DR.
BRANDON FL 33511**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/29/1994

4. FEI Number

59-3069341

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

25

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

30

Country

9. Name and Address of Current Registered Agent

**BEYERS, DLFRED R
205 APOLLO BEACH BLVD
SUITE 108
APOLLO BEACH FL 33572**

10. Name and Address of New Registered Agent

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 *Delva R. Beyers*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7/6/98
DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **DAVIS, RICHARD A**
STREET ADDRESS **717 WESTWOOD DR**
CITY-ST-ZIP **BRANDON FL 33511**

TITLE **VP** ☐ DELETE

NAME **DAVIS, CHRIS**
STREET ADDRESS **3414 SAN PEDRO ST**
CITY-ST-ZIP **TAMPA FL 33629**

TITLE **S** ☐ DELETE

NAME **DAVIS, RHODA**
STREET ADDRESS **717 WESTWOOD DR**
CITY-ST-ZIP **BRANDON FL 33511**

TITLE **T** ☐ DELETE

NAME **DAVIS, COLETTE T**
STREET ADDRESS **3414 SAN PEDRO ST**
CITY-ST-ZIP **TAMPA FL 33629**

TITLE **V** ☐ DELETE

NAME **DAVIS, TODD**
STREET ADDRESS **717 WESTWOOD DR**
CITY-ST-ZIP **BRANDON FL 33511**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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

Richard A. Davis

7/6/98

813 689-3195

CR2E034 (5/98)