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FILED
Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000041058 (6)**

1. Corporation Name
BAREFOOT MANIACS, INC.

Principal Place of Business

**2514 SANDRIDGE LANE
ST. CLOUD FL 34771
US**

Mailing Address

**2514 SANDRIDGE LANE
ST. CLOUD FL 34771-7325
US**



3. Date Incorporated or Qualified
07/04/1994

3a. Date of Last Report
05/01/1996

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

4. FEI Number

59-3249840

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. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**MINAHAN, TIMOTHY J
2514 SANDRIDGE LANE
ST CLOUD FL 34771**

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

Timothy J. Minahan

Timothy J. MINAHAN

4-20-97

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DVT** ☐ DELETE
NAME **MINAHAN, TIMOTHY J.**
STREET ADDRESS **2514 SANDRIDGE LANE**
CITY - ST - ZIP **ST. CLOUD FL**

TITLE **PS** ☐ DELETE
NAME **MINAHAN, USA**
STREET ADDRESS **2514 SANDRIDGE LANE**
CITY - ST - ZIP **ST. CLOUD FL**

TITLE **D** ☐ DELETE
NAME **CARPENTER, JOHN**
STREET ADDRESS **9972 KILGORE ROAD**
CITY - ST - ZIP **ORLANDO FL**

TITLE **D** ☐ DELETE
NAME **CALLAHAN, STEVE**
STREET ADDRESS **830 LONGBAY COURT**
CITY - ST - ZIP **KISSIMMEE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 do 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.

SIGNATURE:

Timothy J. Minahan

Timothy J. MINAHAN

4-20-97

407-957-4206

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

0466603

CR2E034 (9/96)