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 # P94000054694

JOHN MCKINNEY INC.

Principal Place	of Business	Mailing Address					
J & J BAR-B-OUE 2620 9TH ST. W.		213 10TH AVENUE DRIVE WEST Bradenton FL 34205		DO NOT WRITE IN THIS	SPACE		
BRADENTON FL	34205				3. Date Incorporated or Qualifed		
					07/22/1994		ĺ
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	died For
		26		65-0518352	Not	Applicable	
Suite, Apt. i	# etc	Suite, Apt. #, etc.				\$8.75 A	dditional
22				5. Certifcate of Status Desired	Fee Rec	quired	
City & State		City & State		6. Election Campaign Financing	\$5.00 f	May Be	
23		28		Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year in	angible	
24	25	29 30			Personal Property Tax.	☐ Yes	□No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
			81	Name			
MCKINNEY, JOHN 213 10TH AVENUE DRIVE WEST			82	Stroot Add	ress (P.O. Box Number is Not Acceptable)		
			62	Street Address (P.O. Box Northber Is Not Acceptable)			
Bradenton Fl 34205			83				
			84	City		85 Zip C	ode
				-	FL	• · · _	
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				t signature require	red when reinstating) DATE	IO DIDECTO	DC (N) 42
12.	OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	PT	☐ DELETE	1.1 TITLE			□ Cuange	☐ ∧adilloii
NAME	MCKINNEY, JOHN J			İ			
STREET ADDRESS	1010 0111 0111221 1111112		1.3 STREET	ADDRESS			
CITY-ST-ZIP			1.4 CITY-S	r-zip			- A statistica
TITLE	/P □ DELETE 2.1 TO		2.1 TITLE	ļ		Change	☐ Addition
NAME	MONITAL I, LOCICLE		22 NAME				
STREET ADDRESS	2.0 1011771121122 21 11		2.3 STREET	ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34205			T-ZIP			
TITLE	S	☐ DELETE	3,1 TITLE			☐ Change	☐ Addition
NAME	MCKINNEY, BRODERICK		32 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE	1		☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
C/TY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition

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.

52 NAME

6.1 TITLE

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Change

☐ Addition

CR2E034 (11/98)

=:28;

May 27, 1999 8:00 am Secretary of State

05-27-1999 90010 028 ***150.00