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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90153 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # P94000055564

1. Corporation Name
TAILGATORS, INC.



Principal Place of Business
 9333 PINEBREST RD
 PENSACOLA FL 32534
 US

Mailing Address
 9333 PINE FOREST ROAD
 PENSACOLA FL 32534

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Ap. #, etc.

22 City & State

23 Zip County

24 Zip 25 County

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip 30 Country

3. Date Incorporated or Qualified
 07/25/1994

4. FEI Number
 59-3267239

Applied For
 Additional
 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 the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

O'DANIEL, MICHAEL S JR
 9333 PINE FOREST ROAD
 PENSACOLA FL 32534

10. Name and Address of New Registered Agent

81 Name
 Christopher Todd Beardon

82 Street Address (P.O. Box Number is Not Acceptable)
 7474 Northpointe Blvd.

83

84 City Pensacola FL 85 Zip Code 32514

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 *Christopher Todd Beardon* DATE 4-23-99

12. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	BEARDON, CHRISTOPHER TODD	
STREET ADDRESS	2755 BAYVIEW WAY	
CITY-ST-ZIP	PENSACOLA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Christopher Todd Beardon	
1.3 STREET ADDRESS	7474 NORTHPOINTE BLVD	
1.4 CITY-ST-ZIP	PENSACOLA, FLORIDA 32514	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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 change, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Christopher Todd Beardon* DATE 4-23-99

850-476-1099
 850-477-6768