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## 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 # P9400075253  1. Corporation Name DADDY O'S DONUTS & BAKERY, INC.					* HARRIARR HAR ARM RANK RANK RANK RANK RANK RANK RANK RANK	<b>.</b> 	8X <b>48</b> 188 1 <b>88</b> 1	
Principal Place of Business Mailing Address			BOX 7.74					
13227 US HWY 19 HUDSON FL 34667		13227 173 11071 13	13227 03 11111 13					
US		US				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed			
·					10/10/1994			
2. Principal Place of Business		2a. Mailing Address 2a - Po. Box 7174		4. FEI Number		olied For Applicable		
[		26 Suite, Apt. #, etc.			59-3294285	\$8.75 A	<del></del>	
······································					5. Certifcate of Status Desired	Fee Red		
[ <sup></sup> ]		City & State	City & State		6. Election Campaign Financing	\$5.00	<del></del>	
23	28				Trust Fund Contribution	Added to	•	
Zip			Country	_	8. This corporation owes the current year	Intangible	V	
24	. 25	29 30		<u> </u>	Personal Property Tax.	☐ Yes	ĎΝο	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent		
CDA	HALF HARFO I		81	Name				
GRAHAM, JAMES L			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
8128 GREENSIDE LN BAYONET POINT FL 34667			02					
DATONET POINT PL.34007			83					
				City		85 Zip C	ode	
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 in							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.								
{	n familiar with, and accept the obligation	ons of, Section 607,0000, Florida	Statutes.				į	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Regi	stered Agent	t signature requir	ired when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	P	☐ DELETE 1				☐ Change	☐ Addition (	
NAME	Citatani cranco c		1.2 NAME	}		•		
STREET ADDRESS	OILO GILLITOIDE D'IIC		1.3 STREET	ADDRESS				
CITY-ST-ZIP	BAYONET POINTE FL		1.4 CITY-ST 2.1 TITLE	-ZiP		Change	Addition	
TITLE	VP					∐ Guange	☐ Addition	
NAME	GRAHAM, JANET DORIS	The state of the s	2.2 NAME					
STREET ADDRESS	0120 0112110122 2 1112		2.3 STREET				,	
CITY-ST-ZIP TITLE	BAYONET POINTE FL  VPS   DELETE		2. 4 CITY-ST	T- ZH2		Change	☐ Addition	
NAME.	BOULANGER, CHRISTINE R	<del>-</del>					_	
STREET ADDRESS	**** ** =00111	<b>1</b>	3.2 NAME 3.3 STREET	ADDRESS			ı	
CITY-ST-ZIP	SPRING HILL FL		3.4. CITY-S1					
TITLE	VPT		4.1 TITLE			☐ Change	Addition	
NAME	GRAHAM, TIMOTHY J		4. 2 NAME	1				
STREET ADDRESS	8128 GREENSIDE LANE		4.3 STREET	ADDRESS				
CITY-ST-ZIP	BAYONET POINT FL		4.4 CITY-ST	r-ZIP				
TITLE			5.1 TITLE	_		Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP			5.4 CITY-ST	í-ZIP		[7] Change	☐ Addition	
ا ا	reger in the second second		6.1 TITLE 6.2 NAME			Change	[] Accinon	
t	(G) (T) (T) (A) (B) - A (C) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	T T	6.3 STREET	TADDOECC				
[ STREET ADDRESS]	ration in the second se		0.3 3 INCE I	ADDINESS				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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.

**SIGNATURE:** 

727 - 862, 4972