

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000079717 (2)

1. Corporation Name

SUBWAY OF WEST LAKE CITY, INCORPORATED



Principal Place of Business

Mailing Address:

ROUTE 13, BOX 1141-1
LAKE CITY FL 32055
US

ROUTE 13, BOX 1141-1
LAKE CITY FL 32055
US

3. Date Incorporated or Qualified

10/12/1994

3a. Date of Last Report

04/25/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 32055

2a. Mailing Address:

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 32055

4. FEI Number

59-3266615

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

LESTOCK, JAMES J
ROUTE 13, BOX 1141-1
LAKE CITY FL 32055

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

(Signature, typed or printed name of registered agent and title in applicable)

(NOTE: Registered Agent signature is required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME LESTOCK, JAMES J
STREET ADDRESS 4 SAINT JAMES AVE
CITY- ST- ZIP LAKE CITY FL

TITLE VT ☐ DELETE

NAME LESTOCK, NANCY A
STREET ADDRESS 4 SAINT JAMES AVE
CITY- ST- ZIP LAKE CITY FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

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

LESTOCK

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

32025

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

32025

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *JJ Lestock* JAMES J LESTOCK

4-19-96

904-755-1860

Date

Daytime Phone

CR2E034 (12/95)