

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 16 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 # **P95000005746 (9)**

1. Corporation Name

S.P.W. RESTAURANT GROUP INC.

Principal Place of Business

**3720 NW 13TH STREET
GAINESVILLE FL 32609**

Mailing Address

**3720 NW 13TH STREET
GAINESVILLE FL 32609-5906**



2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

01/23/1995

3a. Date of Last Report

04/24/1996

4. FEI Number

59-3330787

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

**REGAN, DONALD J
1025 SW 81 DRIVE
GAINESVILLE FL 32607**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

(The Old Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **REGAN, DONALD J**
STREET ADDRESS **1025 SW 81 DRIVE**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE **~~VP~~** ☐ DELETE
NAME **REGAN, LAURE K.**
STREET ADDRESS **1025 SW 81 DRIVE**
CITY-ST-ZIP **GAINESVILLE FL**

TITLE **V.P.** ☐ DELETE
NAME **DONALD G. YOUNG**
STREET ADDRESS **110 NE 88 AVE**
CITY-ST-ZIP **HIGH SPRINGS, FL 32643**

TITLE **V.P.** ☐ DELETE
NAME **MICHAEL J. ARCY**
STREET ADDRESS **7623 SW 10 AVE**
CITY-ST-ZIP **GAINESVILLE, FL 32607**

TITLE **S** ☐ DELETE
NAME **MELISSA A. ARCY**
STREET ADDRESS **7623 SW 10 AVE**
CITY-ST-ZIP **GAINESVILLE, FL 32607**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **32607**

2.1 TITLE **T, D** ☒ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP **32607**

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:

[Signature]

4-14-97

352-377-2782

CR2E034 (9/96)