

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

FILED  
Apr 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000012257 (8)

1. Corporation Name

CANNON CREEK, INC.



Principal Place of Business

Mailing Address

235 NORTH FEDERAL HIGHWAY - #D  
DELRAY BEACH FL 33483

235 NORTH FEDERAL HIGHWAY - #D  
DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1995

4. FEI Number

65-0557963

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 RT 15 BOX 4112

Suite, Apt. #, etc.

2a. Mailing Address

26 RT 15 BOX 4112

Suite, Apt. #, etc.

City & State

23 LAKE CITY, FL.

Zip

24 32024

Country

25 U.S.A.

City & State

28 LAKE CITY, FL.

Zip

29 32024

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

O'LEARY, MELANIE  
235 NORTH FEDERAL HWY.  
#D  
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name

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

RT 15 BOX 4112

83

84 City

LAKE CITY

FL

85 Zip Code  
32024

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

Melanie O'Leary

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

4-17-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME O'LEARY, MELANIE  
STREET ADDRESS 235 NORTH FEDERAL HWY., #D  
CITY-ST-ZIP DELRAY BEACH FL 33483

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME O'LEARY, MELANIE  
1.3 STREET ADDRESS RT 15 BOX 4112  
1.4 CITY-ST-ZIP LAKE CITY, FL. 32024

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ 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.

SIGNATURE

Melanie O'Leary

CP2E034 (10/97)