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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
**1997**

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

DOCUMENT # **P95000030629 (6)**

1. Corporation Name
**LEHIGH FAMILY BILLIARDS, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 25 N HOMESTEAD RD<br>UNIT 31<br>LEHIGH FL 33936 | 2407 ~~FLAGG MALL~~ DRIVE<br>UNIT 31<br>FT. MYERS FL 33901<br>US |

3. Date Incorporated or Qualified: 04/19/1995
3a. Date of Last Report: 05/01/1996

| | |
|---|---|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21 25 n Homestead Rd | 26 ~~25~~ N Homestead Rd. |
| Suite, Apt. #, etc.<br>22 #31 | Suite, Apt. #, etc.<br>27 #31 |
| City & State<br>23 Lehigh Acres Fla | City & State<br>28 Lehigh Acres, Fla |
| Zip / Country<br>24 33936 / 25 U.S. | Zip / Country<br>29 33936 / 30 U.S. |

4. FEI Number: 65-0573972 ☐ 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 | 10. Name and Address of New Registered Agent |
|---|---|
| DELAPLAINE, STEPHEN D<br>17288 PHLOX DR<br>FT MYERS FL 33912 | 81 Name: Eugenia E. Becknor<br>82 Street Address (P.O. Box Number is Not Acceptable): 1151 South Loop<br>83<br>84 City: Lehigh Acres, Fl FL 85 Zip Code: 33936 |

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: Eugenia C Becknor - President — DATE
Signature of, and printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DS<br>DELAPLAINE, STEPHEN D<br>17288 PHLOX DR<br>FT MYERS FL 33912 ☑ DELETE | 11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP | president<br>Eugenia E Becknor<br>1151 South Loop. Lehigh Acres Fla 33936 ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ DELETE | 21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP | vice president<br>Robin Fraun<br>908 N.E 19th Terr. Cape Coral, FL. 33909 ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ DELETE | 31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ DELETE | 41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ DELETE | 51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ DELETE | 61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP | ☐ Change ☐ Addition |

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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:** Eugenia C Becknor — April 1, 1997 — (941)-458-8696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #