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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000062740 (2)

**AVON PARK FAST FOODS CORPORATION** 

Principal Place of Business

Mailing Address

## **FILED** May 19 1998 8:00am Secretary of State



22 3600 Springhill Business Park Suite 200 Suite 200 Mobile, AL 36608  22	lred ny Be ees gible
2. Principal Place of Business   2a. Mailing Address   3600 Springhill Business Park   2f. 3600 Springhill Business Park   2f. 3600 Springhill Business Park   2f. Suite 200   56. Certificate of Status Desired   \$8.75 a. Fee Reg Suite 200   520	pplicable litional lred uy Be ees
22 3600 Springhill Business Park 22 Suite 200 3600 Springhill Business Park 3000 Mobile, AL 36608  22	pplicable litional lred uy Be ees
3600 Springhill Business Park 221 Suite 200	litional Ired ny Be ees
3600 Springhill Business Fair Suite 200  Abobile, AL 36608  City & Staje City & Staje Country  27	lred ny Be ees gible
Mobile, AL 36608   28   Mobile, AL 36608   29   Mobile, AL 36608   3381 ANDREW RD   Mobile, AL 36608   Mobile, AL 3660	ees gidle
Trust Fund Contribution   Added to   Added	ees gidle
8. This corporation owes or has paid the current year Inter- Personal Property Tax due June 30.   Yes    9. Name and Address of Current Registered Agent    EVANS, MURRY H   4900 MANATEE AVENUE WEST   SUITE 201   BRADENTON FL 34209   83    44	•
EVANS, MURRY H 4900 MANATEE AVENUE WEST SUITE 201 BRADENTON FL 34209  10	lo
EVANS, MURRY H 4900 MANATEE AVENUE WEST SUITE 201 BRADENTON FL 34209  83  84 City  FL 85 Zip Co  11. Pursuant to the provisions of Socious 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or boils, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the othiquitions of, Section 607.9505, Florida Statutes.  SIGNATURE  Signature brief or printed name at registered layer and the itaquisable (NOTE Registered Agent Agen	
4900 MANATEE AVENUE WEST SUITE 201 BRADENTON FL 34209  82 Street Address (P.O. Box Number is Not Acceptable)  83 Add City FL 85 Zip Co 11. Pursuant to the provisions of Soctions 607,0502 and 607,1508, Florida Statutes.  84 City FL 85 Zip Co 11. Pursuant to the provisions of Soctions 607,0502 and 607,1508, Florida Statutes.  85 City 51 Address (P.O. Box Number is Not Acceptable)  86 Address (P.O. Box Number is Not Acceptable)  87 Address (P.O. Box Number is Not Acceptable)  88 Zip Co 11. Pursuant to the provisions of Soctions 607,0502 and 607,1508, Florida Statutes.  86 Address (P.O. Box Number is Not Acceptable)  87 Address (P.O. Box Number is Not Acceptable)  88 Zip Co 11. Pursuant to the provisions of Soctions 607,0502, Florida Statutes.  88 Address (P.O. Box Number is Not Acceptable)  89 Address (P.O. Box Number is Not Acceptable)  80 Address (P.O. Box Number is Not Acceptable)  80 Address (P.O. Box Number is Not Acceptable)  81 Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Co 85 Zip Contained Statutes.  85 Zip Contained Statutes.  86 Zip Contained Statutes.  86 Zip Contained Statutes.  87 Address (P.O. Box Number is Not Acceptable)  88 Zip Contained Statutes.  88 Zip Contained Statutes.  89 Address (P.O. Box Number is Not Acceptable)  89 Address (P.O. Box Number is Not Acceptable)  89 Address (P.O. Box Number is Not Acceptable)  80 Address (P.O. Box Number is Not Acceptable)  81 Address (P.O. Box Number is Not Acceptable)  82 Address (P.O. Box Number is Not Acceptable)  83 Address (P.O. Box Number is Not Acceptable)  84 Address (P.O. Box Number is Not Acceptab	
SUITE 201 BRADENTON FL 34209  83  84 City FL 85 Zip Co  11. Pursuant to the provisions of Sections 607.0502 and 697.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 re agent. I arm familiar with, and accept the offigations of, Section 607.5005, Florida Statutes  SIGNATURE  Signature typed or protect name of imported page and the disprictable (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  EVANS, MURRY J  12. STREET ADDRESS  CITY-ST-ZIP  MOBILE AL 36619  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. DIV. ST-ZIP  Mobile, AL 36608  17. ST-ZIP  MOBILE AL 36619  DELETE  21. TITL  NAME  BURKE, TED  3361 ANDREW RD  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. DIV. ST-ZIP  Mobile, AL 36608  14. DIV. ST-ZIP  Mobile, AL 36608  17. ST-ZIP  MOBILE AL 36619  DELETE  17. ST-ZIP  MOBILE AL 36619  DELETE  17. ST-ZIP  MOBILE AL 36619  DELETE  17. ST-ZIP  MOBILE AL 36619  Change	
BRADENTON FL 34209  83  84 City  FL  85 Zip Cd  11. Pursuant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as reagen. I am familiar with, and accept the orbigations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typid or printed name of required agent and the displicable  OF LICERS AND DIRECTORS  11. DELETE  1.1 TILE  PS  OF LICERS AND DIRECTORS  1.3 STREET ADDRESS  CITY-S1-ZIP  MOBILE AL 98619  DELETE  1.1 TILE  PS  DELETE  2.1 TILE  PS  DELETE  3.1 TILE  PS  DELETE  2.1 TILE  PS  DELETE  3.1 TILE  AND DELETE  3.1 TILE  PS  DELETE  3.1 TILE  PS  DELETE  3.1 TILE  AND DELETE  3.1 TILE  PS  DELETE  3.1 TILE  AND DELETE  4.1 TILE  AND DELETE  4.2 NAME  4.3 SIREET ADDRESS  SIR	
11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 reagent. I am familiar with, and accept the orbigations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature brief or printed name of registered agent and accept the orbigations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature brief or printed name of registered agent and accept the appointment as reagent. I am familiar with, and accept the orbigations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature brief or printed name of registered agent and accept the appointment as reagent. I am familiar with, and accept the orbigations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature brief or printed name of registered agent and accept the appointment as reagent. I am familiar with, and accept the orbigations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIRESTADORESS  HARRY  SIRESTADORESS	
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The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as reagent, I am familiar with, and accept the othigations of, Section 607.0505, Florida Statutes.    Signature	le
SIGNATURE    Signature tyrind on printed name of registered agent and life of applicable   (NOTE Registered Agent signature required when reinstating)   DATE	gistered
Signature byind or printed registred agent and flicid applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	istered
TITLE  NAME  EVANS, MURRY J  STREET ADDRESS  CITY-ST-ZIP  MOBILE- AL-96619  TITLE  PS  STREET ADDRESS  CITY-ST-ZIP  MOBILE- AL-96619  TITLE  PS  STREET ADDRESS  CITY-ST-ZIP  MOBILE- AL-36619  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  MOBILE- AL-36619  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  MOBILE- AL-36619  TITLE  TITLE  NAME  HARTMAN, JAMES W III  STREET ADDRESS  CITY-ST-ZIP  MOBILE AL-36619  TITLE  TITLE  MOBILE AL-36619  TITLE  MAME  4.2 NAME  4.3 STREET ADDRESS  TITLE  MAME  4.3 STREET ADDRESS  TITLE  MAME  4.3 STREET ADDRESS	
TITLE  MAME STREET ADDRESS CITY-ST-ZIP  SSET ANDREW RD MOBILE AL 96619  12 NAME 13 STREET ADDRESS Suite 200 Mobile, AL 36608  14 CITY-ST-ZIP Mobile, AL 36608  12 NAME 13 STREET ADDRESS Suite 200 Mobile, AL 36608  14 CITY-ST-ZIP Mobile, AL 36608  17 Change Mobile, AL 36608  17 Change Mobile, AL 36608  18 Change Mobile, AL 36608  19 Change Mobile, AL 36608  10 Change Mobile, AL 36608  10 Change Mobile, AL 36608  11 Change Mobile, AL 36608  11 Change Mobile, AL 36608  11 Change Mobile, AL 36608  15 Change Mobile, AL 36608  16 Change Mobile, AL 36608  17 Change Mobile, AL 36608  17 Change Mobile, AL 36608  18 Change Mobile, AL 36608  18 Change Mobile, AL 36608  19 Change Mobile, AL 36608  10 Change Mobile, AL 36608  10 Change Mobile, AL 36608	V 12
STREET ADDRESS   SUITE 200   MOBILE AL 96619   1.3 STREET ADDRESS   Suite 200   Mobile, AL 36608	Addition
CITY-ST-ZIP	
DELETE   D	
STREET ADDRESS   SUBJECT   STREET ADDRESS   SUBJECT	
STREET ADDRESS CITY-ST-ZIP  MOBILE AL 36619  DELETE NAME HARTMAN, JAMES W III  STREET ADDRESS CITY-ST-ZIP  MOBILE AL 36619  DELETE 23 STF Mobile, AL 36608  23 STF Suite 200 33 ST Mobile, AL 36608  32 NA Suite 200 33 ST Mobile, AL 36608  34 CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS TREET ADDRESS  STREET ADDRESS  TITLE NAME 43 STREET ADDRESS	Addition
MOBILE AL 36619   2.4 CG, D. E.   Mobile, AL 36608	
DELETE	
HARTMAN, JAMES W III  STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS  HARTMAN, JAMES W III  32 NJ Suite 200 33 ST Mobile, AL 36608  34 CITY-ST-ZIP 41 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS	
STREET ADDRESS   SUITE 200   3.3 ST   Mobile, AL 36608	Addition
33.51   Mobile, AL 36608     34.0117-51-219     1711LE       1711LE       1711LE       1711LE       1711LE	
3.4. City - St - Zip	
NAME STREET ADDRESS 4.2 NAME 4.3 STREET ADDRESS	
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CITY-\$T-ZIP         4.4 CITY-\$T-ZIP           TITLE	Addition
	T WOOKIOII
CITY-ST-ZIP	Addition
	7 MOULTON
64 CITY-ST-ZIP  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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i).	
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 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 appeallock 12 or Block 13 if chapter, or on an attaching it with an address.	rmation