

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90043 039 ***150.00

DOCUMENT # P95000065392

1. Corporation Name

TRIPLE A - E, INC.

Principal Place of Business

6721 W. NORVELL BRYANT HIGHWAY
CRYSTAL RIVER FL 34429

Mailing Address

6721 W. NORVELL BRYANT HIGHWAY
CRYSTAL RIVER FL 34429

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/22/1995

4. FEI Number
59-3332753

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

MINIARD, LARENA
6731 W. NORVELL BRYANT HIGHWAY
CRYSTAL RIVER FL 34429

10. Name and Address of New Registered Agent

81 Name

Rutherford Miniard

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

6721 W. Norvell Bryant Hwy

83

84 City

Crystal River

FL

85 Zip Code

34429

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/99

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME
MINIARD, LARENA
STREET ADDRESS
6721 W. NORVELL BRYANT HWY.
CITY-ST-ZIP
CRYSTAL RIVER FL 34429

TITLE ☐ DELETE

NAME
PARKER, RONALD S
STREET ADDRESS
6721 W. NORVELL BRYANT HIGHWAY
CITY-ST-ZIP
CRYSTAL RIVER FL 34429

TITLE ☐ DELETE

NAME
MOORE, ROBERT
STREET ADDRESS
6721 W. NORVELL BRYANT HWY.
CITY-ST-ZIP
CRYSTAL RIVER FL

TITLE ☒ DELETE

NAME
PERRY, KENNETH
STREET ADDRESS
6721 W NORVELL BRYANT HWY
CITY-ST-ZIP
CRYSTAL RIVER FL 34429

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
Rutherford Miniard
1.3 STREET ADDRESS
6721 W. Norvell Bryant Hwy
1.4 CITY-ST-ZIP
Crystal River FL 34429

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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
Gary Lacerte
4.3 STREET ADDRESS
6721 W. Norvell Bryant Hwy
4.4 CITY-ST-ZIP
Crystal River, FL 34429

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rutherford Miniard
Rutherford Miniard 4/27/99 352-564-0556

Date

Daytime Phone #

CR2E034 (11/98)

0487459