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Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90076 008 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P95000066110

1. Corporation Name
TRIPLE A - F, INC.

Principal Place of Business
6721 W NORVELL BRYANT HWY.
CRYSTAL RIVER FL 34429

Mailing Address
6721 W NORVELL BRYANT HWY.
CRYSTAL RIVER FL 34429

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1995

4. FEI Number

59-3332755

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.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

MINIARD, LARENA
6731 W NORVELL BRYANT HWY.
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)
6731 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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	MINIARD, LARENA	6721 W NORVELL BRYANT HWY	CRYSTAL RIVER FL	<input type="checkbox"/>
V	GLEN A DIEHL	6721 W NORVELL BRYANT HWY	CRYSTAL RIVER FL	<input checked="" type="checkbox"/>
S	DAVE S. JOHNSON	6721 W. NORVELL BRYANT HWY	CRYSTAL RIVER FL	<input type="checkbox"/>
T	YOUNGERMAN, KERRY	6721 W. NORVELL BRYANT HWY	CRYSTAL RIVER FL 34429	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
D	Rutherford Miniard	6731 W. Norvell Bryant Hwy	Crystal River, FL 34429	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Lewis Martin	6731 W. Norvell Bryant Hwy	Crystal River, FL 34429	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Rutherford Miniard* Rutherford Miniard 4/27/99 352-564-0556
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)