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

PROFIT CORPORATION ANNUAL REPORT 1998

City & State

23 Zip

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F STATE FLORIDA DEPARTMEN Sandra B. Mori

Secretary of St TIONS DIVISION OF CORPO

DOCUMENT # P95000091348 (9)

HUNGRY HERON EATERY, INC.

Principal Place of Business	Mailing Address 2330 PALM RIDGE RD STE #1 SANIBEL FL 33957 US			
2330 PALM RIDGE RD STE #1 SANBEL FL 33957 US				
2. Principal Place of Business	2a. Mailing Address			
21	26			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
	F1			

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

			Į.		11/29/1995				
al Place of Business		2a. Mailing Ac	ldress		4. FEI Number		Applied For		
		26			65-0626587		Not Applicable		
Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Regulred		
State City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees				
	Country 25	Zip 29	Countr 30	гу	This corporation owes or has Personal Property Tax due Jui		rrent year Intangible		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
ELLISON, LARRY D			61	1 Name	Name				
17274 SAN CARLOS BLVD #202 FORT MYERS BEACH FL 33931		62	82 Street Address (P.O. Box Number is Not Acceptable)						
			6:	3					
			 -	-1 -:			T T		

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		A COTE D				DATE		
	Signature, typed or printed name of registered agent and title if applicate OFFICERS AND DIRECTORS	oie (NOTE: R	13.	required when reinstating)	CHANGES TO OF		DIDECTOR	P (N) 12
12.	D OFFICERS AND DIRECTORS	DELETE	1.1 TITLE	ADDITIONS/C	MANGES TO OF	FICENS AND	Change	Addition
NAME	_	L. Ottett	1.2 NAME				A sugar	
	IANELLI, THEODORE			17 un AIXIE	RUACH 1	ALLIA		
STREET ADDRESS	1482 UMBER COURT		1.3 STREET ADDRESS	63446		36.17		
CITY-ST-ZIP	PUNTA GORDA FL 33983	T priess	1.4 CITY - ST - ZIP	SANIBEC	, rc 32	293 /	J 186	The state of
TITLE	D	DELETE	2.1 TITLE	1710 DINE SANIBEC		_	Change	Addition
NAME	ianelli, james		2.2 NAME	N/4/1-	RUNCW	Rlun	,	ļ
STREET ADDRESS	1482 UMBER COURT		2.3 STREET ADDRESS	1710 0146				
CITY-ST-ZIP	PUNTA GORDA FL 33983		2. 4 CITY-ST-ZIP	1710 DIXIE SANIBEL	SPL 33	3957		
TITLE		DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY - ST - ZIP					
TITLE		DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY - ST - ZIP					
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
C17V_ST_7ID			6.4 CITY - ST 7IP					

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 certify that I am an officer or director of the corporation or the receiver or trustee employeered 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 intrachment with an address.

SIGNATURE: