

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
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90020 001 ***150.00

DOCUMENT # P95000091432

1. Corporation Name

GOOSE EGG BAR RANCH, INC.

Principal Place of Business

HCRI BOX 121 E
HAMPTON FL 32044

Mailing Address

P.O. BOX 925
STARK FL 32091-0925

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1995

4. FEI Number

59-3442275

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

21 910 SE 6th St.

Suite, Apt. #, etc.

22 City & State

23 Lake Butler FL

24 32054 25 US

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

JOHNS, WILLIAM GLENN
HCRI BOX 121 E
HAMPTON FL 32044

10. Name and Address of New Registered Agent

81 Name William Glenn Johns

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

83 10639 US HWY 301 S

84 City Hampton FL

85 Zip Code 32044

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-99

12. OFFICERS AND DIRECTORS

TITLE DP
NAME JOHNS, WILLIAM G
STREET ADDRESS HCRI BOX 121 E
CITY-ST-ZIP HAMPTON FL 32044

TITLE
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME Debra B. Johns
1.3 STREET ADDRESS 10591 US HWY 301 S
1.4 CITY-ST-ZIP Hampton FL 32044

2.1 TITLE ST
2.2 NAME William Glenn Johns
2.3 STREET ADDRESS 10591 US HWY 301 S
2.4 CITY-ST-ZIP Hampton FL 32044

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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: Debra B. Johns 4-29-99 (352) 468-2585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)