

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000049040 (4)

1. Corporation Name
BIRDS TO GO, INC.

Principal Place of Business

38045 COUNTY RD 439
EUSTIS FL 32726

Mailing Address

38045 COUNTY RD 439
EUSTIS FL 32726



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1996

4. FEI Number

59-3385882

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

24

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

29

9. Name and Address of Current Registered Agent

ALESHIRE, LOIS E
38045 COUNTY RD 439
EUSTIS FL 32726

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Lois E. Aleshire

(NOTE: Registered Agent's signature required when reinstating)

DATE

4-1-98

12. OFFICERS AND DIRECTORS

TITLE D
NAME ALESHIRE, LOIS E
STREET ADDRESS 38045 COUNTY RD 439
CITY-ST-ZIP EUSTIS FL 32726 ☐ DELETE

TITLE D
NAME ALESHIRE, JOHN D
STREET ADDRESS 38045 COUNTY RD 439
CITY-ST-ZIP EUSTIS FL 32726 ☐ DELETE

TITLE D
NAME TEETER, MATTHEW C
STREET ADDRESS 38045 COUNTY RD 439
CITY-ST-ZIP EUSTIS FL 32726 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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 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.

SIGNATURE

Lois E. Aleshire

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362143 2912

CR2E034 (10/97)