

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**  
**Mar 31, 1999 8:00 am**  
**Secretary of State**

03-31-1999 90057 012 \*\*\*150.00

DOCUMENT # P96000065035

1. Corporation Name

CANAC KITCHENS OF S.W. FLORIDA, INC.

Principal Place of Business

Mailing Address

2890 Palm Beach Blvd.  
Fort Myers, FL 33916

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

8/5/96

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

24

25

29

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4. FEI Number

65-0698599

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Peter J. Jaensch  
3400 S. Tamiami Trail, Ste. 303  
Sarasota, FL 34239

81 Name

Dan Duke

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

2890 Palm Beach Blvd.

83 Ft. Myers, FL 33916

84 City

Ft. Myers, FL 33916

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Dan Duke

3/18/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME Julian Attree  
STREET ADDRESS 2890 Palm Beach Blvd  
CITY-ST-ZIP Ft. Myers, FL 33916

1.1 TITLE P  
1.2 NAME Dan Duke  
1.3 STREET ADDRESS 2890 Palm Beach Blvd.  
1.4 CITY-ST-ZIP Ft. Myers, FL 33916

TITLE D  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE DS  
2.2 NAME Russ Attree  
2.3 STREET ADDRESS 2890 Palm Beach Blvd.  
2.4 CITY-ST-ZIP Ft. Myers, FL 33916

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
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:

Russ Attree

3/18/99

Date

Daytime Phone #

CR2E034 (11/98)