

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
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90060 011 ***150.00

DOCUMENT # P96000069229

1. Corporation Name

~~FUN & GAMES FLORIDA, INC.~~
GAMES OF MANATEE, INC.

Principal Place of Business

Mailing Address

~~4805 CORTEZ ROAD WEST~~
BRADENTON FL 34210

~~4805 CORTEZ ROAD WEST~~ 218-82ND ST
~~BRADENTON FL 34210~~ HOLMES BEACH,
FL 34217

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/15/1996

4. FEI Number

65-0699185

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

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~BURNS, JASON B~~
~~3800 LAKE BAYSHORE DRIVE #503~~
~~BRADENTON FL 34209~~

81 Name

SHIRLEY M. DEGRAVES

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

218-82ND ST.

83

HOLMES

84 City

BEACH

FL

85

Zip Code

34217

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

Shirley M. DeGraves

(NOTE: Registered Agent signature required when reinstating)

1/25/99
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME ~~BURNS, JASON B~~
STREET ADDRESS ~~3800 LAKE BAYSHORE DRIVE, #503~~
CITY-ST-ZIP ~~BRADENTON FL 34207~~

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME YARBROUGH, NETTY M
STREET ADDRESS 218 82ND STREET
CITY-ST-ZIP HOLMES BEACH FL 34217

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME SHIRLEY M. DEGRAVES
STREET ADDRESS 218-82ND ST.
CITY-ST-ZIP HOLMES BEACH, FL 34217

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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:

Netty M. Yarbrough

1/25/99 (941) 778-0377
Date Daytime Phone #

CR2E034 (11/98)

0468335