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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000081934

Principal Place of Business

PEA RIDGE BACKYARD SHEDS, INC.

5593 HWY 90 PEA RIDGE FL 32571		PO BOX 15268 PENSACOLA FL 32514			DO NOT WRIT	TE IN THIS	SPACE	<b>.</b>		
						3. Date Incorporated or Qualifed 09/30/1996				
2. Principal	Place of Business	2a. Mailing Address	Mailing Address			4. FEI Number			Applied For	
21		26	26			59-3401884			Not Applicable	
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.	·			5. Certifcate of Status Desired		<b>T</b>		ditional
22		27				0. Common of Change Beamse	<u> </u>	Fe	e Req	uired
City & Sta	ate	City & State				6. Election Campaign Financing			.00 N	
23		28				Trust Fund Contribution		Ad	ded to	Fees
Zip	Country	Zip	Country	У		8. This corporation owes the curre	ent year Inta		_	٦.,
24	25		30			Personal Property Tax.		Yes	5 <u>L</u>	]No
	9. Name and Address of Curr	ent Registered Agent		-		10. Name and Address of New R	legistered /	Agent		
901	HIMMEL, DEBBIE		81	۱	Name					
5593 HWY 90- 327 LURGITH STREET			82	2	Street Addr	ddress (P.O. Box Number is Not Acceptable)				
	<del>VAIDGE F</del> L <del>32571</del> 20/A a2 <i>505</i>		83	3						
r ·	-0(11 6250		84	4	City			85	Zip Co	ode
					Ť	oration submits this statement for the	FL		•	
SIGNATURE	Signature, typed or printed name of registered a			ent s	signature required	d when reinstating)  ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRE	CTOR	S IN 12
12.	OFFICERS :	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AIN	☐ Chi		Addition
TITLE	DEBBIE SCHIMMEL	☐ DELETE	1.1 TITLE					□ \$	a.igo	
NAME	PROPERTY 20 7 3 3 7 / A	ATTA ST.	1.2 NAME							
STREET ADDRES	S TOPO TIVE OF	EL. 35505	1.3 STREE							
CITY-ST-ZIP	PEARIDGETE P'Cala,	DELETE	1.4 CITY-1		ZIP			Chi	2000	Addition
TITLE	RA DEBBIE COUNTRIES	C) nere ie	2.1 TITLE						ai igc	
NAME	DEBBIE SCHIMMEL s <del>5593 HWY 98</del> ~ 3ンフ との	RETTA STREET	2.2 NAME							
STREET ADDRES	S 3998 HWT 90 30 2 2 3	FIA 25.505	2.3 STREE							
CITY-ST-ZIP	REARIDGE FT P'Colo	, FLA. 32505	2.4 CITY-	_	-ZiP			☐ Chi	ande	☐ Addition
TITLE	S COMMINE	DELETE	3.1 TITLE						arige	[_] Addition
NAME	DEBBIE SCHIMMEL s  5 <del>699-HWY-90-</del> ヨュフ んの	WITTH STRIFT	3.2 NAME							
STREET ADDRES	S DEA-PIDOE EL ON	21/4 0/2001	3.3 STREE							
CITY-ST-ZIP	PEA RIDGE FL P'Cola	1-24 - 3 +303	3.4. CITY-	_	-ZIP			[] Ch	2000	Addition
TITLE	1		4.1 TITLE 4.2 NAME					_, 0,,	ungo	□ radiiion
NAME STREET ADDRES			4. 2 NAME		ADODESS					
	5		4.4 CITY-							
CITY-ST-ZIP	<del>                                     </del>	☐ DELETE	5.1 TITLE		-28			Ch	ange	Addition
NAME			5.2 NAME					_	-	
STREET ADDRES	أء		5.3 STREE		ADDRESS					
	<u> </u>		5,4 CITY-	ST-	ZIP					
TITLE	+	☐ DELETE	6.1 TITLE		<u> </u>			Ch	ange	Addition
NAME			6.2 NAME	Ξ					-	_
STREET ADORES	e		6.3 STREE	ET A	ADDRESS					
STREET AUUNES	v:				1					

6.4 CITY-ST-ZIP

SIGNATURE:

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 attachpeen with an endress, with all other like empowered.

**FILED** 

May 06, 1999 8:00 am Secretary of State

05-06-1999 90256 005 \*\*\*150.00