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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P96000097672 (5)

SWEET ANNIE'S ENTERPRISES, INC.

## **FILED** Mar 19 1998 8:00am Secretary of State



	e of Business	Mailing Address					
692 BALD EAGLE DRIVE MARCO ISLAND FL 34145			380 SANDHILL STREET				
MARCO ISLAN	IU FL 34145	MARCO ISLAND FL 34145			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					11/27/1996		
2. Principal Pi	ace of Business	2a. Mailing Add	ress		4. FEI Number		oplied For
21		26			65-0711087		lot Applicable
Suite, Apt. :	#, etc	Suite, Apt. #	, etc.		5. Certificate of Status Desired		Additional Required
City & State	)	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
Zip	Country	Z(r)	Co	ountry	8. This corporation owes or has paid the cu		
24	25	29	30				□ No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered	Agent	
GU'	EST, THOMAS			81 Name			
	SANDHILL ST			82 Street	Address (P.O. Box Number is Not Acceptable)		
	CO ISLAND FL 34145						
				83			
				84 City		85 Zip	Code
				1 1	Fi	_     `	
agent. I ar	m familiar with, and accept the obli	idations of, Section 607					
SIGNATURE					corporation submits this statement for the purpose poration's board of directors. I hereby accept the appropriate the purpose appropriate the purpose points and the purpose appropriate the purpose points and the purpose provided when reinstaling).		
	Signature: typed or pointed name of registered in	ngent and little it applicable	(NOTL: Hegister	red Agent signature			
SIGNATURE  12.  1itte	Signature: typed or pointed name of registered in	njent and trie if applicable ND DBR CTORS	(NOTL: Hegister	red Agent signature	required when reinstating) DATE		PRS IN 12
12.	Signature: typed or printed name of registrics for OFFICERS A	njent and trie if applicable ND DBR CTORS	(NOTL: Hogister 13 ELETE 1.1	red Agent signature	required when reinstating) DATE	ID DIRECTO	PRS IN 12
12. TITLE NAME	Signature by est or printed name of registrics to OFF ICE HS A P GUEST, THOMAS D	njent and trie if applicable ND DBR CTORS	(NOTL: Hogister 13 ELETE 1.1: 1.2	red Agent signature	required when reinstating) DATE	ID DIRECTO	PRS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS A P GUEST, THOMAS D 380 SANDHILL ST.	njent and trie if applicable ND DBR CTORS	(NOTL: Hogister 13 ELETE 1.1 1.2 1.3	red Agent signature  TITLE  NAME  STREET ADDRESS	required when reinstating) DATE	ID DIRECTO	PRS IN 12
12. TITLE NAME	OFFICERS A P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145	njestarist telestrappte utde ND DIHL CTORS	(NOTL: Hegister 13 ELETE 1.1 1.2 1.3	red Agent signature I, TITLE NAME	required when reinstating) DATE	ID DIRECTO	PRS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST	njestarist telestrappte utde ND DIHL CTORS	(NOTE Hogister  13  ELETE 11  12  13  14  ELETE 21	red Agent signature ), TITLE NAME STREET ADDRESS City-St-Zip	required when reinstating) DATE	ID DIRECTO Change	PRS IN 12
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A	njestarist telestrappte utde ND DIHL CTORS	(NOTE Register  13 ELETE 11 12 13 14 ELETE 21 22	red Agent signature  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change	PRS IN 12
12.  TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njestarist telestrappte utde ND DIHL CTORS	(NOTE Register  13 ELETE 11 12 13 14 ELETE 21 22 23	red Agent signature  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	required when reinstating) DATE	ID DIRECTO Change	PRS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A	njest and telest appte of the NO DIRI CTORS DE D	(NOTE Register  13  ELETE 11  12  13  14  ELETE 21  22  23  24	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change	PRS IN 12 Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte of the NO DIRI CTORS DE D	(NOTE Register  13 ELETE 11 12 13 14 ELETE 21 22 23 24 ELETE 31	ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change	PRS IN 12 Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte of the NO DIRI CTORS DE D	(NOTE Register  13 ELLETE 11 12 13 14 ELLETE 21 22 23 24 ELLETE 31 32	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change	PRS IN 12 Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte of the NO DIRI CTORS DE D	(NOTE Register  13  ELLETE 11  12  13  14  ELLETE 21  22  23  24  ELLETE 31  32  33	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change	PRS IN 12 Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njeri and lete it apple of lie NO DIHL CTORS DE	(NOTE Register  13 ELETE 11 12 13 14 ELETE 21 22 23 24 ELETE 31 32 33 34	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change	PRS IN 12 Addition Addition Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njeri and lete it apple of lie NO DIHL CTORS DE	(NOTE Register  13 ELLETE 11 12 13 14 ELLETE 21 22 23 24 ELLETE 31 32 33 34	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
12.  TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE NAME STREET ADDRESS CITY: SI: ZIP TITLE	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njeri and lete it apple of lie NO DIHL CTORS DE	(NOTE Register  13  ELLETE 11  12  13  14  ELLETE 21  22  23  24  ELLETE 31  32  33  34  ELLETE 4.1	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte at the NO DIFIE CTORS DE	(NOTE Register  13 14 12 13 14 ELETE 21 22 23 24 ELETE 31 32 33 34 ELETE 41 4.2 4.3	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	Addition Addition Addition Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte of the NO DIFIE CTORS D	(NOTE Register  13 14 12 13 14 ELETE 21 22 23 24 ELETE 31 32 33 34 ELETE 41 4.2 4.3	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Z NAME STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition Addition Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte at the NO DIFIE CTORS DE	(NOTE Register  13  ELETE 11  12  13  14  ELETE 21  22  23  24  ELETE 31  32  33  34  ELETE 41  4.2  4.3  ELETE 5.1	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	Addition Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	njest and telest appte at the NO DIFIE CTORS DE	(NOTE Register  13  ELETE 11  12  13  14  ELETE 21  22  23  24  ELETE 31  32  33  34  ELETE 41  4.2  4.3  ELETE 51  52	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P NAME STREET ADDRESS CITY-ST-ZIP TITLE P NAME STREET ADDRESS CITY-ST-ZIP TITLE C STREET ADDRESS CITY-ST-ZIP TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	Addition Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	Decidence of applicable  NO DIFFE CHORS  D  D	(NOTE Register  13 14 12 13 14 ELETE 21 22 23 24 ELETE 31 32 33 34 ELETE 41 4.2 4.3 4.4 ELETE 5.1 5.2 5.3	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	Addition Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	Decidence of applicable  NO DIFFE CHORS  D  D	(NOTE Register  13  ELETE 11  12  13  14  ELETE 21  22  23  24  ELETE 31  32  33  34  ELETE 41  4.2  4.3  ELETE 51  52  5.3  5.4	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	Addition Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	Decidence of applicable  NO DIFFE CHORS  D  D	(NOTE Register  13  ELLETE 11  12  13  14  ELLETE 21  22  23  24  ELLETE 31  32  33  34  ELLETE 41  42  43  ELLETE 51  52  53  54	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS I CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE P NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P GUEST, THOMAS D 380 SANDHILL ST. MARCO ISLAND FL 34145 ST GUEST, EILEEN A 380 SANDHILL ST.	Decidence of applicable  NO DIFFE CHORS  D  D	(NOTE Register  13  ELLETE 11  12  13  14  ELLETE 21  22  23  24  ELLETE 31  32  33  34  ELLETE 41  42  43  ELLETE 51  52  53  54  ELLETE 51  62	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change Change Change Change	PRS IN 12 Additio Additio Additio

r nemony corning man me information supplied with this hing does not quality for the exemption stated in Section 119.07(3)(t). Florida Statutes, I further certify that the information indicated on this annual report is 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 compowered 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.

3-12-98