

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

FILED
May 01 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 # P97000000336 (2)
 1. Corporation Name
SOUTHWEST FLORIDA GULF PIZZA INVESTMENT, INC.



Principal Place of Business 1111 THIRD AVENUE WEST SUITE 300 BRANDON FL 34205	Mailing Address 1111 THIRD AVENUE WEST SUITE 300 BRANDON FL 34205
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/02/1997		4. FEI Number 65-0740070		Applied For <input type="checkbox"/> Not Applicable
2. Principal Place of Business 21 4600 Bayline Dr.	2a. Mailing Address 26 P.O. Box 746	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
23 N. Ft. Myers FL	28 Estero FL	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24 33917	25 US	29 33928	30 U.S.	

9. Name and Address of Current Registered Agent PRATHER, ALAN H ESQ. 1111 THIRD AVENUE WEST SUITE 300 BRANDON FL 34205		10. Name and Address of New Registered Agent		
81	Name			
82	Street Address (P.O. Box Number is Not Acceptable)			
83				
84	City Bradenton	85	State FL	Zip Code 34205

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	VD TAYLOR, MICHAEL G.
STREET ADDRESS		1.3 STREET ADDRESS	4600 BAYLINE DR
CITY-ST-ZIP		1.4 CITY-ST-ZIP	NFM, FL 33917
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	SD PRATHER, ALAN HARDY
STREET ADDRESS		2.3 STREET ADDRESS	1111 3RD AVE W, #300
CITY-ST-ZIP		2.4 CITY-ST-ZIP	BRADENTON FL 34205
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	TD PRATHER, BEVERLY A.
STREET ADDRESS		3.3 STREET ADDRESS	1111 3RD AVE W, #300
CITY-ST-ZIP		3.4 CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	PD TAYLOR, JENNIFER N.
STREET ADDRESS		4.3 STREET ADDRESS	4600 BAYLINE DR
CITY-ST-ZIP		4.4 CITY-ST-ZIP	NFM, FL 33917
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	VD MOUNTAIN, JOHN
STREET ADDRESS		5.3 STREET ADDRESS	4600 BAYLINE DR
CITY-ST-ZIP		5.4 CITY-ST-ZIP	NFM, FL 33917
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE Annabel D. Jader, Pres 4-23-98 941-267-7755

CR2E034 (10/97)