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

DOCUMENT # **P97000010794**1. Corporation Name

THRIFTWAY OF INDIANTOWN, INC.

•			
Principal Place of Business	Mailing Address		
15488 SOUTHWEST WARFIELD BLVD.	15488 SOUTHWEST WARFIELD BLVD.		

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90001 008 ***150.00



15488 Southwi Indiantown Fl	24056	INDIANTOWN FL 34956	TO BEAD:		
INDIANI OTTIA FL	. 41000			DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualifed	
				02/03/1997	
2 Principal Pl	ace of Business	2a. Mailing Address	•	4. FEI Number	Applied For
2. FINICIPAL FI	and a business	26 15215 80th	Delve Al.	65-0712401	Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.	V-11 V V 1 V 1		\$8.75 Additional
22	7, USD	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Palm Beach (sardens fl	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25	29 33418 3	o usa	Personal Property Tax	Yes No
	9. Name and Address of Current I		ن.	10. Name and Address of New Register	ed Agent
			81 Name	R. Mark Crews	
	ing, kenneth		92 Chro	R. Mark Crews Address (P.O. Box Number is Not Acceptable)	
1548	15488 SOUTHWEST WARFIELD BLVD. 82 SI			15215 80 L Drive N.	ļ
	ANTOWN FL 34956		83	IVAIN UV VIIIV	
			1	1	
	•		84 City	D + 0 + C + + = E	85 Zip Code 33418
	·	·		Palm Beach Gardens F	L 33418
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named	corporation submits this statement for the purpose	opointment as registered
agent. I a	m familiar with, and accept the obligatio	ns of, Section 607.0505, Florid	da Statutes.	pration's board of directors. I hereby accept the ap	,
			•	3-24-	99
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: F	Registered Agent signature r	equired when reinstating)	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	⊠ DELET £	1.1 TITLE		☐ Change ☐ Addition
NAME	MORING, KENNETH		1.2 NAME	•	
STREET ADDRESS	15488 SOUTHWEST WARFIELD I	RI VD	1.3 STREET ADDRESS		•
	INDIANTOWN FL 34956	JE10.	1.4 CITY-ST-ZIP		
CITY-ST-ZIP	VD	[] DELETE	2.1 TITLE	President	Change Addition
TITLE	. 	LJ VELLIC	2.2 NAME	11031001	
NAME	CREWS, R. MARK	DU 10		15215 80th Drive N.	
STREET ADDRESS	15488 SOUTHWEST WARFIELD	BLVU.	2.3 STREET ADDRESS		0
CITY-ST-ZIP	INDIANTOWN FL 34956	<u> </u>	2.4 CITY-ST-ZIP	Palm Beach Gardens FL 33	Y Change ☐ Addition
TITLE	S	☐ DELETE	3.1 TITLE	· ·	☐ Cusude ☐ Vocidou
NAME	Moring, Mary Ellen		3.2 NAME	A-1 0	• ^
STREET ADDRESS	15488 SOUTHWEST WARFIELD	BLVD.	3.3 STREET ADDRESS	2800 N. Ocean Drive, Apt. A:	C /7
CITY-ST-ZIP	INDIANTOWN FL 34956		3.4. CITY-ST-ZIP	West Palm Beach FL. 334	04-3221
TITLE	T	☐ DELETE	4.1 TITLE		Change Addition
NAME	CREWS, LOIS		4, 2 NAME	_	
	15488 SOUTHWEST WARFIELD	RI VD	4.3 STREET ADDRESS	15215 90th Drive N.	
STREET ADDRESS		DETU.	•	Palm Beach Gardens, FL.2	12 1018
CITY-ST-ZIP	INDIANTOWN FL 34956	☐ D€LETE	4.4 CITY-ST-ZIP 5.1 TITLE	Agost. Sec.	Change Addition
TITLE				MEGIST, SCC.	
NAME	• •		5.2 NAME	Ada Bush Contag 13600 s. W. Conners Hwy.	
STREET ADDRESS	ļ		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Okeechobec, Ft. 34914	
TITLE		☐ DELETE	6.1 TITLE	'	☐ Change ☐ Addition
NAME	•		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
GINEEL MUUNESS	and the state of the		A COLTY OF TID		

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:

Daytime Phone #