

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 # P97000027823

1. Corporation Name,
AUBURNDALY LADY, INC.

Principal Place of Business
123 VAN FLEET COURT
AUBURNDALY FL 33823
US

Mailing Address
P.O. BOX 691
AUBURNDALY FL 33823
US

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90033 005 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1997

4. FEI Number

59-3445854

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

21 321 HAVENDALE BLVD.

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

23 AUBURNDALY, FL

28 AUBURNDALY, FL

24 Zip Country

29 Zip Country

24 33823 25 US

29 30 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVIS, CHARLES
321 HAVENDALE BLVD
~~209 PALMETTO STREET~~
AUBURNDALY FL 33823

This line is
blank! →

81 Name DAVIS, CHARLES
82 Street Address (P.O. Box Number is Not Acceptable)
321 HAVENDALE BLVD.
83
84 City AUBURNDALY FL 85 Zip Code 33823

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

Charles D. Davis

CHARLES D. DAVIS

3/31/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME FAULKNER-DAVIS, CAROL E
STREET ADDRESS 123 VAN FLEET COURT
CITY-ST-ZIP AUBURNDALY FL 33823

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

TITLE P ☐ DELETE
NAME DAVIS, CHARLES D
STREET ADDRESS 123 VAN FLEET COURT
CITY-ST-ZIP AUBURNDALY FL 33823

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Charles D. Davis CHARLES D. DAVIS

3/31/99

(941) 965-1902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)