## 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 # P97000029253 (6)

GREAT AMERICAN ICE CREAM COMPANY, INC.

## **FILED** May 26 1998 8:00am Secretary of State



Principal Place of	Business	Mailing Address			
3113 LAWTON RD., STE. 225 ORLANDO FL 32803		3113 LAWTON RD., STE.	225		
		ORLANDO PL 32803		DO NOT W	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifi	ied
				04/01/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26 2457-A J-HIAUROUSE		59-343477	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27 RO # 329			Fee Required
City & State		City & State	FICATION	6. Election Campaign Financin	·
23  7in	Country	28 <i>ORIANOC</i> Zip	Country	<del></del>	L Added to Fees
Zip	<u>⊢</u> ′	- אפסגם ד	30 U.J.A	Personal Property Tax due J	s paid the current year Intangible 🔑 June 30. 🏿 Yes 🔲 No
24	25 Name and Address of Curren		30 07.0.19	10. Name and Address of New	
	FFEY, JOHN D JR.		81 Name		
	AWTON RD., STE. 225			HNISTEPHER J	· FICED
	NOO FL 32803		82 Street A	Address (P.O. Box Number is Not Acce	
UNLAN	100 FL 32803		83	VI CHILL DICIO	2 24 02
•			01	RIAINDO FLA.	
			84 City		FL 85 Zip Code
11 Pulk ant to th	he provisions of Sections 607 050	02 and 607 1508. Horida Statut	tes the above-named r	corporation submits this statement for t	the nurness of changing its registered
office or regis	stered agent, or both, in the State	of Florida Such change was	authorized by the corp	oration's board of directors. I hereby a	ccept the appointment as registered
	amiliar with and accept the obliga	anglis of Section 697.050%, Fi	onda Statules.		
SIGNATURE	The breed or proved out the control of the control	A street man share the contract of the contrac	II. Begisleren Agent signature i	equited when teinslating)	DATE
Signa -	nature: typicd or princed olimpion in give restricts OF LICERS AN	# . <del> </del>	II flogisleren Agent signature r		DATE FFICERS AND DIRECTORS IN 12
/ Signa 12.	OFFICERS AN	# . <del> </del>	11 Flagislaren Agent signature i 13. 1.1 TILLE		FFICERS AND DIRECTORS IN 12  Change X Addition
12.	OFFICERS AN	DIRECTORS	13.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12  Change Addition
12. HILE D	OFFICERS AND CELOOD, CHRISTOPHER J	DIRI CTORS DELETE	13. 1.1 TILE 1.2 NAME	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12  Change Addition
12. TITLE D NAME FI STREET ADDRESS 3	OFFICITIS AND PLOOD, CHRISTOPHER J 1113 LAWTON RD., STE. 225	DIRI CTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12  Change Addition
112. TITLE D NAME FI STREET ADORESS 3 CITY-ST-ZIP 0	OFFICERS AND CELOOD, CHRISTOPHER J	DIRI CTORS DELETE	13. 1.1 TILE 1.2 NAME	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12  Change Addition
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