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PROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90188 042 ***150.00

DOCUMENT # P97000029723

FLORIDA POTTERY INC.

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City & State Country Added ty Fees Trust Fund Confribution By Country S. Miss corporation owes the current year mangible Person of Property Tax In Name and Address of Current Registered Agent SIMMONS, SCOTT 250 CENTER COURT VENICE FL 34292 Simulation to the provisions of Stations 607 0501 and 607 1508. Florida Statists, the above-named corporation submits this statement for the purpose of changing its egistered agent. In minimal with, and a capt the obligation of Section 607 0501 and 607 1508. Florida Statists, the above-named corporation submits this statement for the purpose of changing its egistered agent. In minimal with, and a capt the obligation of Section 607 0505, Fordia Statists and expension of Section 607 0505. Fordia Statists SIGNATURE SIGNATU	22 Ver	nice FL	27				5. Certificate of Status Desired	Fee Re	r uired
Trust Fund Contribution			_ +	-,			6. Election Campaign Financing	\$5.00	May Be
Zip Court ty Zip	23 3	1292	28				Trust f und Contribution	Added	c Fees
SIMMONS, SCOTT 250 CENTER COURT VENICE FL 34/292 11. Pursuant to the provisions of Sections 607 (950) and 607/1508, Florida Statiles, the above-named exposition submits this statement for the purpose of changing its registered agent, or birth, in the State of Florida Such change was authorized by the corporation's board of lirectors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 (950) and 607/1508, Florida Statiles, the above-named exposition submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 (960, Florida Statiles). SIGNATURE 11. Pursuant to the provisions of Sections 607 (950) and 607/1508, Florida Statiles, the above-named exposition submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 (960, Florida Statiles). SIGNATURE 12. Pursuant to the provisions of Sections 607 (950) and 607 (960, Florida Statiles). SIGNATURE 12. Septimen, typed or preset name of registered agent agent and their applicable (not E happtered operations accepted when reliebance). 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. STATE TARGET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STATE TARGET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STATE TARGET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STATE TARGET ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STATE TARGET ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STATE TARGET ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. STATE TARGET ADDITIONS CHANGES TO OFFICERS AND DIRECTORS CHANGES CHA			Zip	Cou	ntry		8. This corporation owes the current year		_
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SIMMONS, SCOTT 250 CENTER COURT VENICE FL 34292 Street Avidress (P.O. Box: Number is Not Acceptable)		9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registers	d Agent	
250 CENTER COURT VENICE FL 34292 83	CIL	MONE COTT			81	Name			
VENICE FL 34292 84					82	Street Add	ress (P.O. Bo): Number is Not Acceptable)		
### City FL 85 Zip Code 11. Pursuint to the provisions of Sictions 607 0501; and 607.1506, Florida Statites, the above-named corporation subm is this statement for the purpose of changing its egistered agent, or birth, in the State of Florida. Such change as althorized by the corporation's board of threators. Thereby accept the abjuniment as registered agent, and a coept the obligations of, Section 607.0505, Forida Statities. Interest Intere									
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14. I hereby certify that the information supplied with this filling 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 Charter 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.

6.4 CITY-ST-ZIP

SIGNATURE:

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