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Secretary of State

04-14-1999 90147 040 ****61.25

05-17-1999 90062 033 ****88.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000056336

1. Corporation Name

BACK COUNTY PRODUCTIONS, INC.

Principal Place of Business

4320 WEST KENNEDY BLVD.
TAMPA FL 33609

Mailing Address

4320 WEST KENNEDY BLVD.
TAMPA FL 33609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1997

4. FEI Number

59-3456149

Applied For

☒ Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional Fee Required6. Election Campaign Financing Trust Fund Contribution ☐**\$5.00** May Be Added to Fees8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

4913 Pilgrims Parkway

2a. Mailing Address

4913 Pilgrims Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33611

Country

USA

Zip

33611

Country

USA

9. Name and Address of Current Registered Agent

BERGIN, EDWARD J
4320 WEST KENNEDY BLVD.
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name **BERGIN, EDWARD J.**

82 Street Address (P.O. Box Number is Not Acceptable)

4913 Pilgrims Parkway

83

84 City **Tampa****FL**85 Zip Code **33611**

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

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

(NOTE: Registered Agent signature required when reappointing)

3/10/99

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	BERGIN, EDWARD J	
STREET ADDRESS	4320 WEST KENNEDY BLVD.	
CITY-ST-ZIP	TAMPA FL 33609	

TITLE	D	☐ DELETE
NAME	DANIEL, RICHARD	
STREET ADDRESS	4505 BAY TO BAY	
CITY-ST-ZIP	TAMPA FL 33629	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	BERGIN, EDWARD J	☒ Change ☐ Addition
1.2 NAME	4913 Pilgrims Parkway	
1.3 STREET ADDRESS	TAMPA, FL 33611	
1.4 CITY-ST-ZIP		

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

3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/99

Date

813 831 3131

Daytime Phone

CR2E034 (11/98)