

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Jul 22, 1999 8:00 am**  
**Secretary of State**

07-22-1999 90011 040 \*\*\*150.00

0093246

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P97000057880**

1. Corporation Name

**THE FRENCH HEN, INC.**

Principal Place of Business

596 INDIAN ROCKS ROAD  
BELLEAIR BLUFFS FL 33770  
US

Mailing Address

596 INDIAN ROCKS ROAD  
BELLEAIR BLUFFS FL 33770  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/26/1997**

4. FEI Number

**59-3457998**

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.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MACPHERSON, GILBERT P P.A.**  
**1822 DREW STREET**  
**SUITE 8**  
**CLEARWATER FL 34625**

81 Name

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

83

84 City

**FL**

85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **BOLLEA, LINDA**  
STREET ADDRESS **130 WILLADEL DRIVE**  
CITY-ST-ZIP **BELLEAIR FL 34616**

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

CITY-ST-ZIP ☐ Change ☐ Addition

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 law; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**Linda Bollea**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**99**  
Daytime Phone #

CR2E034 (5/99)



1401 Court Street • Clearwater, Florida 33756  
(727) 446-3058 • FAX (727) 441-1499 • LBRPA@aol.com

593734-90011-40  
P970000057880

Shareholders:

Douglas R. Birch, CPA  
Craig A. Gilman, CPA  
Michael D. Kindt, CPA  
Michael E. Lewis, CPA  
Ronald M. Ricardo, CPA

July 8, 1999

Division of Corporations  
Annual Report Filings  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

Re: **The French Hen, Inc.**  
**ID #59-3457998**

Dear Sir:

Enclosed is the Corporate Annual Report for the above-referenced taxpayer. The return is being filed on the second notice because the first notice was never received. Accordingly, we are including payment for \$150.00 and request that the additional \$400.00 charge be abated.

Your understanding in this matter will be greatly appreciated. If you need any additional information relative to this filing, please contact me directly at (727) 446-3058.

Sincerely,

Douglas R. Birch  
Certified Public Accountant

DRB:lb  
Enclosures

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