

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

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90008 019 ***150.00

DOCUMENT # P97000060460

1. Corporation Name
B.R. FITZHUGH, INC.

Principal Place of Business

2156 AGAVE MANOR
MIDDLEBURG FL 32068

Mailing Address

2156 AGAVE MANOR
MIDDLEBURG FL 32068

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1997

4. FEI Number

59-3467747

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

21 712 CHATHAL DR

Suite, Apt. #, etc.

2a. Mailing Address

26 712 CHATHAL

Suite, Apt. #, etc.

City & State

23 O.P., FL

City & State

28 O.P., FL

Zip

24 32073

Country

25 CIAY

Zip

29 32073

Country

30 CIAY

9. Name and Address of Current Registered Agent

FITZHUGH, B R
2156 AGAVE MANOR
MIDDLEBURG FL 32068

10. Name and Address of New Registered Agent

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

Betty Rae Fitzhugh

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb 15, 1999

12. OFFICERS AND DIRECTORS

TITLE DPT ☐ DELETE
NAME FITZHUGH, B R
STREET ADDRESS 2156 AGAVE MANOR
CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE DS ☐ DELETE
NAME FITZHUGH, MATTHEW
STREET ADDRESS 2156 AGAVE MANOR
CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE DV ☐ DELETE
NAME BROWN, BETTY
STREET ADDRESS 4803 MAGILL RD.
CITY-ST-ZIP JACKSONVILLE FL 32220

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 PRESIDENT ☒ Change ☐ Addition
1.2 NAME FITZHUGH, B R
1.3 STREET ADDRESS 712 CHATHAL DR
1.4 CITY-ST-ZIP O.P., FL 32073

2.1 TITLE SECRETARY ☒ Change ☐ Addition
2.2 NAME FITZHUGH, MATTHEW
2.3 STREET ADDRESS 712 CHATHAL DR
2.4 CITY-ST-ZIP O.P., FL 32073

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:

BETTY GRAEF FITZHUGH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 15, 1999

Date

213-0462

Daytime Phone #

CR2E034 (11/98)