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FILED
May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000069959 (9)

1. Corporation Name

BEAVER BRYANT'S MAGNUM PAWN & GUN, INC.

Principal Place of Business

830 N.E. 24TH STREET
OCALA FL 34470

Mailing Address

830 N.E. 24TH STREET
OCALA FL 34470



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/11/1997

4. FEI Number

59-3462930

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 830 NE 24th ST

Suite, Apt. #, etc.

22

City & State

23 Ocala

Zip

24 34470

Country

25 MARION

2a. Mailing Address

26 830 NE 24th ST Ocala

Suite, Apt. #, etc.

27

City & State

28 Ocala

Zip

29 34470

Country

30 MARION

9. Name and Address of Current Registered Agent

BRAYANT, CHESTER C JR.
830 N.E. 24TH STREET
OCALA FL 34470

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 Chester Bryant Jr.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
BRYANT, CHESTER C JR
STREET ADDRESS 830 N.E. 24TH STREET
CITY-ST-ZIP Ocala FL 34470

TITLE ☐ DELETE

NAME D
BRYANT, GRACE
STREET ADDRESS 830 N.E. 24TH STREET
CITY-ST-ZIP Ocala FL 34470

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

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.

SIGNATURE:

Grace Bryant

4/20/98 352 8671317

CR2E034 (10/97)