

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
Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90086 024 ***150.00

DOCUMENT # P97000072126

1. Corporation Name
EUBANKS BOYS, INC.

Principal Place of Business
8449 GARDENS CIR. #14
SARASOTA FL 34243

Mailing Address
8449 GARDENS CIR. #14
SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/20/1997

4. FEI Number
65-0775671

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

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Sarasota, FL

City & State
Sarasota, FL

Zip
34239

Country
Sarasota

Zip
34239

Country
Sarasota

9. Name and Address of Current Registered Agent

EUBANKS, TIM
8449 GARDENS CIR. #14
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name Eubanks, Tim
82 Street Address (P.O. Box Number is Not Acceptable)
2241 Bee Ridge Rd
83
84 City Sarasota FL 85 Zip Code 34239

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: Tim Eubanks

(NOTE: Registered Agent signature required when reinstating)

DATE 4-13-99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	EUBANKS, TIM	2241 BEE RIDGE ROAD	SARASOTA FL 34239	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
P	Eubanks, Tim	2241 Bee Rid		<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Tim Eubanks

DATE 4-13-99 991-921-1258

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0477112