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

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90048 022 ***158.75

DOCUMENT # P97000078181 1. Corporation Name

SURRATT, INC.

Principal Place of Business

Mailing Address

|--|--|

5011 NW 34TH GAINESVILLE F		5011 NW 34TH ST GAINESVILLE FL 32605			3. Date Incorporated or Q 09/10/1997	OT WRITE IN THIS S	SPACE	
2 Principal P	lace of Rusiness	2a. Mailing Address			4. FEI Number		T A	pplied For
2. Principal Place of Business 21 407 NW 13th stret 26 28 Mailing Address 26 26					59-3466632			ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Des		-\$8.75	Additional -
22		27			5. Certificate of Status Des	enen 🔼	Fee R	equired
City & State City & State					6. Election Campaign Fina	ancing		May Be
	reovine, F1.	28			Trust Fund Contribution	<u> </u>	Added	to Fees
Zip 3260	Country	_ '	Country		8. This corporation owes t	•		X
24 366		29 30			Personal Property Tax.		☐ Yes	∠No
	9. Name and Address of Currer	nt Registered Agent	- 04		10. Name and Address of	New Registered A	gent	
CLID	DATT VENNETH C		81	Name \$1	ian Surrai	#		
SURRATT, KENNETH S 5011 NW 34TH ST			82	Street Addre	ess (P.O. Box Number is Not	Acceptable)		
	NESVILLE FL 32605		_	7 350	2m. 8rmg -	Ter Court		
GAI	NESVILLE FL 32003		83					
·				City Gai	ساوه بازلاد	FL.	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statutes, th	ne abov	e-named corpo	pration submits this statement	for the numose of o	hanging it	s registered
agent. I a	to the provisions of Sections	Brian Sur	H \(resident	when reinstating)	J(7)/	19	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES	TO OFFICERS AND		
TITLE	D	DELETE	1.1 TITLE				☐ Change	☐ Addition
NAME	SURRATT, KENNETH S	,	1.2 NAME					
STREET ADORESS		· ·	1.3 STREE	TADDRESS				
CITY-ST-ZIP	HAWTHORNE FL 32640		1.4 CITY-S	T-ZIP			r=3 a.	
TITLE	D	☐ DELETE	2.1 TITLE				Change	Addition
NAME	SURRATT, THERESA J	l	2.2 NAME	Į				
- STREET ADDRESS	1	. محصدت سند ۱۳۵۵ د ۱۶ باسری	2.3 STREE	TADDRESS	-ಡಾ ಬ್ಯಾಡಾಕ್ಕಾಡ ಹಾಹ್ಯಾಬ್ಯಾ	ســــ عر دي		
CITY-ST-ZIP	GAINESVILLE FL 32608		2. 4 CiTY-5	ST-ZIP				<u> </u>
TITLE	D	☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME	SURRATT, BRIAN R		3.2 NAME					
STREET ADDRESS	5320 SW 82ND TERR		3.3 STREE	TADDRESS				
CITY-ST-ZIP	GAINESVILLE FL 32608		3.4. CITY-5	ST-ZIP		<u>-</u>		
TITLE		☐ DELETE	4.1 TITLE				☐ Change	Addition Addition
NAME			4. 2 NAME					
STREET ADDRESS		1	4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
1	1		STANAC 3					

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.

5.3 STREET ADDRESS

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE FEMILIES AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

325-225-2858

Change

☐ Addition