## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000085621 (5)

SIERRA GRILLE V, INC.

Principal Place of Business

Mailing Address

**FILED** Jan 15 1998 8:00am Secretary of State



1500 UNIVERSITY BLVD. WEST UNIT #1 JACKSONVILLE FL 32218		4400 MARSH LANDING BLVD. STE. 2 PONTE VEDRA BEACH FL 32082		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address					10/03/1997 4. FEI Number	Applied For
21	area or business	26			59-3471314	Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.	<u> </u>			\$8.75 Additional
22		— · · · ·	27		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the	current year Intangible
24			30			Yes No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent  81 Name		
BARON L. BARTLETT, P.A.				Name		
50 HIGHWAY A1A STE. 103 PONTE VEDRA BEACH FL 32082			8	2 Street A	ddress (P.O. Box Number is Not Acceptable)	
			8	3		
			8	1 City	F	85 Zip Code
office or re	o the provisions of Sections 607.0 egistored agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such change w	as authorized t	ov the corpo	orporation submits this statement for the purpose oration's board of directors. I hereby accept the a	of changing its registered
SIGNATURE				·		
	Signature, typed or pented name of registered	agent and litle if applicable ( AND DIRECTORS	NOTE: Registered A	gent signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
12.	D	DELETE	1.1 TITLE	• 1	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	BRUCE, ROBERT G		1.2 NAM			
STREET ADDRESS	4400 MARSH LANDING BL	Vn #2		ET ADDRESS		
City-SI-ZIP	PONTE VEDRA BEACH FL		1.4 City-	1		
TITLE		☐ DELETE	2.1 THILE			Change Addition
NAME			2.2 NAMI			
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 C(TY		+ 4 et - ;	
THTLE		☐ DELET <b>e</b>	3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			3.2 NAM			
STREET ADDRESS			3.3 STRE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	- ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STRE	T ADDRESS		
CITY - ST - ZIP			4.4 CITY	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STRE	T ADDRESS		
C(TY-ST-ZIP			5.4 CITY-	\$T-ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME	4		
STREET ADDRESS			6.3 STREI	T ADDRESS		
CITY-S1-7IP			64 0017	\$1-7IP		

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 eath; 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 13 if changed, or on an attachment with an address.