

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

**FILED**  
**Aug 21 1998 8:00am**  
**Secretary of State**

**DOCUMENT # P97000090226 (6)**

1. Corporation Name

**CROSS CREEK TACKLE, INC.**



Principal Place of Business

RT 3 BOX 124-A  
CROSS CREEK FL 32640

Mailing Address

RT 3 BOX 124-A  
CROSS CREEK FL 32640

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/20/1997**

4. FEI Number

**59-3474350**

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**BARKER, SAMUEL K**  
**14427 SE 183 PLACE**  
**CROSS CREEK FL 32640**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D**  
**BARKER, SAMUEL K**  
**14427 SE 183 PLACE**  
**CROSS CREEK FL 32640**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
**P**  
**BARKER, SAMUEL K.**  
**14427 SE 183 PLACE**  
**CROSS CREEK, FL 32640**

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
**V**  
**BARKER, NINA M.**  
**14427 SE 183 PLACE**  
**CROSS CREEK, FL 32640**

☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
**200002623852**  
**-08/25/98--01002--032**  
**\*\*\*150.00**

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: **SAMUEL K BARKER** / **PRESIDENT**  
**10-1-98 352-411-4840**

CR2E034 (5/98)

*Cross Creek Tackle, Inc.*

Rt. 3, Box 124-A  
Cross Creek, FL 32640  
Office/FAX (352) 466-4840

(2)

8/12/98

Divisions of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern,

Last month I received a second notice in regards to my filing fee. I had never received a first notice. I called your office and was instructed to just send in \$150.00 and a letter explaining I had not received a 1st notice. Later my check was returned with a letter stating I owed more because it was late. This was just prior to me leaving on another road trip. Before I left I called one of your offices again. I was instructed to call 850-487-6059. At that time I spoke with Trevor or least that's name it looks like I wrote down. Since there was no time to type a letter prior to my departure on my road business trip 3 weeks ago, is why I am now just returning an answer. Per Trevor, I was told that my check and letter went to a different department. Those in that department were unaware that people that had sent in a cover letter with their check that they had not received their 1st notice, had been given a waiver from any additional charges. Therefore they removed the cover letters and threw them away without actually reading them or paying any attention to them. I was told it was an oversight in communication between offices. I was also told to return my \$150.00 check with another explanation letter but send to the address on the bottom of the letter I received back from Tallahassee. (Copy enclosed)

So, this what I have done. Hopefully the confusion can be straightened out and my obligation will be properly met. If there is any other problem, please call my office phone, 1-352-466-4800 and leave a message. I do not have a secretary to receive calls. I will automatically be paged that I have a message, and I can return your call. I don't want to be charged any extra because of any more communication problems. Thank you for your assistance.

Regards,



Sam Barker