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

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Apr 13 1998 8:00am **PROFIT** LLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P97000105552 (8) DOCUMENT # CRACKER BOY SEASONING, INC. Principal Place of Business Mailing Address 225 BRITTANY AVENUE 225 BRITTANY AVENUE PORT ORANGE FL 32127 PORT ORANGE FL 32127 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/15/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable Suite, Apt. #, etc. Suite, Ant. #. etc. \$B.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Flection Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PRICE, BRENT 225 BRITTANY AVENUE Street Address (P.O. Box Number is Not Acceptable) PORT ORANGE FL 32127 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes. Signature, typed or printed name of regelered agent and one if apple able (NOTE: Registered Agent signature required when remetating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELFTE Change Addition TITLE 1.1 1016 PRICE, BRENT 1.2 NAME NAME 225 BRITTANY AVENUE STREET ADDRESS 1.3 STREET ADDRESS PORT ORANGE FL 32127 CITY-ST-ZIP 1.4 C(1Y - S1 - Z(P DELETE Change Addition TITLE 2.1 HILE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 C(1Y - ST - Z(P DEI ETE Change Addition TITLE 317011 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CHY-ST-ZIP CITY-ST-ZIF DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-\$1-ZIP DELETE Change Addition 6.1 THILE TITLE. NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS 14. Thereby 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 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 supplied with this two and accurate and that my fignature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receipts 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 attrichment with an address.

**FILED**