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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9800000680

FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90036 033 ***150.00

 Corporation 	Name OCCOO				
BOYDS	LDS BOOKS, INC.				
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Principal Place	e of Business	Mailing Address		f feditien in ididt iftil datt ann anny anny anny ann an an an	63 () (46)
406 APRICOT D	nr.	408 APRICOT DR			
OCOEE FL 34761 OCOEE FL 34761				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
				·	
3 D-::1 D	lace of Business	2a. Mailing Address		01/02/1998 4. FEI Number Applied	d For
21 488	B S. KIRKMAN RO		FLORENCE S	7 59-3484-851 Not Ap	plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Addit Fee Required	
City & State	e	City & State		6. Election Campaign Financing 55.00 May	y Be
23 OR L	ANDO. FL.	28 ORLAND	10. FL,	Trust Fund Contribution Added to Fe	ees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	
24 328)	29 32818	30 USA	Personal Property Tax. ☐ Yes ☐	No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
201	C 1870 14444 11		81 Name	v.	
	D, WILLIAM H		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	APRICOT DR		_ 26	BI FLORENCE ST.	
000	DEE FL-34761		83		
			84 City OF	LANDO FL 85 Zip Code	ຶ້າ 8
11 Dureuant	to the provisions of Sections 607 0502	and 607 1508. Florida Sta	tutes, the above-named corr	poration submits this statement for the ournose of changing its regi	istered
office Arr	egistered agent, or both, in the State of m familiar with, and accept the obligation	l Florida. Such change was	authorized by the corporati	on's board of directors. I hereby accept the appointment as registe	ered
	m familiar with, and accept the obligation				
		12 2 2000, 1	1 /	H BAVA 01-13-99	
SIGNATURE	Allen	Dord	OTE: Registered Agent signature require	HI BOYD 01-13-99 ad when reinstating) DATE	
		and title if applicable. (NC	WILLIAM	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
SIGNATURE	Signature, typed or printed name of registered agents OFFICERS AND	and title if applicable. (NC	OTE: Registered Agent signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12 Addition
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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:

NOMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/26/99 407-292-9800

:R2E034 (11/98)