


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

FILED  
Mar 10, 1999 8:00 am  
Secretary of State

03-10-1999 90228 043 \*\*\*150.00

0055445

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **P98000003269**

1. Corporation Name

**DEBBIE TANNER ENTERPRISES, INC.**



Principal Place of Business	Mailing Address
RT. 2 BOX 471 HAVANA FL 32333	RT. 2 BOX 471 HAVANA FL 32333

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>01/12/1998</b>	
21 <b>7702 Fairbanks Ferry Rd</b>	26 <b>7702 Fairbanks Ferry Rd</b>	4. FEI Number <b>59-3486192</b>		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
City & State 23 <b>Havana, FL</b>		City & State 28 <b>Havana, FL</b>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Zip 24 <b>32333</b>	Country 25 <b>Godsden</b>	Zip 29 <b>32333</b>	Country 30 <b>Godsden</b>		

9. Name and Address of Current Registered Agent

**TANNER, DEBORAH B**  
RT. 2 BOX 471  
HAVANA FL 32333

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

**FL**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVST <input type="checkbox"/> DELETE	1.1 TITLE	<del>Deborah B. Tanner</del> PST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANNER, DEBORAH B	1.2 NAME	Tanner, Deborah B.
STREET ADDRESS	RT. 2 BOX 471	1.3 STREET ADDRESS	7702 Fairbanks Ferry Road
CITY-ST-ZIP	HAVANA FL 32333	1.4 CITY-ST-ZIP	Havana, FL 32333
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANNER, DEBORAH B	2.2 NAME	Tanner, Deborah B.
STREET ADDRESS	RT. 2 BOX 471	2.3 STREET ADDRESS	7702 Fairbanks Ferry Road
CITY-ST-ZIP	HAVANA FL 32333	2.4 CITY-ST-ZIP	Havana, FL 32333
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Tanner Sammy M
STREET ADDRESS		4.3 STREET ADDRESS	7702 Fairbanks Ferry Road
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Havana, FL 32333
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: Deborah B. Tanner Deborah B. Tanner 2/22/99 850/508-4994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)