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

PROFIT CORPORATION S ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9800004318

1. Corporation Name

ROOKS: FANDING! ANC!

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90023 006 ***150.00



COOKS BAYOU COMPANY (please see Amendment filed April 1.	1999)			•
Principal Place of Business Mailing Address	1.7777	-) 0:008 51(05 1(001 (03) (00)	
12908 AIR WAY STREET POMPANO CITY FL 32404-2833 POMPANO CITY FL 32404-2833				
		DO NOT WRITE IN THIS S	PACE	_
corrections		3. Date Incorporated or Qualifed 01/14/1998	<u></u>	
Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For	_
21 26		59-3490271	Not Applicable	늬
Suite, Apt. #, etc Suite, Apt. #, etc 27	المحاس المحاس المحدو	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Panama City FL 28 Panama Cit	y FL	Trust Fund Contribution	Added to Fees	_
Zip Country Zip 24 25 29 36	Country	This corporation owes the current year Intar Personal Property Tax.	ngible ∐Yes ∐No	
9. Name and Address of Current Registered Agent	<u> </u>	10. Name and Address of New Registered A	gent	
	81 Name		<u> </u>	1
YOUNG, JUDITH C	82 Street Addre	ess (P.O. Box Number is Not Acceptable)		-
12908 AIR WAY STREET	az Street Addre	ess (F.O. Box Number is Not Acceptable)		
POMPANO CITY FL 32404-2833	83			
			Tee 7:- 0-4-	4
correction		ama City FL	85 Zip Code	
41 Durament to the provisions of Sections 607 0502 and 607 1508 Florida Statutes	the above-named corno	pration submits this statement for the purpose of cl	nanging its registered	7
office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid.	iorized by the corporation	n's board of directors. I hereby accept the appoint	ment as registered	
	a ciatatos.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	egistered Agent signature required	when reinstating) DATE		_] ;
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND		_
TITLE D DELETE	1.1 TITLE		Change Additio	n ;
NAME Young, David F.	1.2 NAME			
STREET ADDRESS 12908 Air Way Street	1.3 STREET ADDRESS			
CITY-ST-ZIP Panama City, FL 32404-2833	1.4 CITY-ST-ZIP			_
TITLE P DELETE	2.1 TITLE	•	Change Additio	10 1
NAME Young, David F.	22 NAME			
STREET ADDRESS 12908 Air Way Street	2.3 STREET ADDRESS			
CITY-ST-ZIP Panama City, FL 32404-2388				Į.
	2.4 CITY-ST-ZIP	<u> </u>	□Change □ Additio	'n
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NAME Young, Judith C. STREET ADDRESS 12908 Air Way Street CITY ST-ZIP Panama City, FL 32404-2833 TITLE VT NAME Hughey. Bonnie J.	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY- ST- ZIP 4.1 TITLE 4. 2 NAME			
NAME Young, Judith C. STREET ADDRESS 12908 Air Way Street CITY ST-ZIP Panama City, FL 32404-2833 TITLE VT NAME Hughey. Bonnie J.	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY- ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		
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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 cylindration 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 attangement with an address, with all other like empowered.

SIGNATURE: