

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000005154

1. Corporation Name
JOYBROOK COMPANY

Principal Place of Business
7820 SOUTH HOLIDAY DR., STE. 230
SARASOTA FL 34231

Mailing Address
7820 SOUTH HOLIDAY DR., STE. 230
SARASOTA FL 34231

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90002 026 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/16/1998

4. FEI Number
65-0812078

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ 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 Country

28 Zip Country

24

25

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30

9. Name and Address of Current Registered Agent

CASSAGNOL, THIERRY
737 FIESTA DR.
SARASOTA FL 34242

10. Name and Address of New Registered Agent

81 Name Thierry Cassagnol
82 Street Address (P.O. Box Number is Not Acceptable)
737 Siesta Drive
83
84 City Sarasota FL 85 Zip Code 34242

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 *Thierry Cassagnol* Thierry Cassagnol

3/31/99

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 ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE President ☐ Change ☒ Addition
1.2 NAME Thierry Cassagnol
1.3 STREET ADDRESS 737 Siesta Drive
1.4 CITY-ST-ZIP Sarasota, FL 34242

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Vice President/Secretary ☐ Change ☒ Addition
2.2 NAME Allan F. Kosack
2.3 STREET ADDRESS 2264 W. Maple Road
2.4 CITY-ST-ZIP Bloomfield, MI 48301

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Treasurer ☐ Change ☒ Addition
3.2 NAME Ray Hudson
3.3 STREET ADDRESS 400 Rhonda Kay Court, Unit 67
3.4 CITY-ST-ZIP Fort Walton, FL 32547

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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: *Thierry Cassagnol* SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/99
Date

(941) 2926-7722
Daytime Phone #

0471455

CR2E034 (1/98)