

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

FILED
Jun 24, 1999 8:00 am
Secretary of State

06-24-1999 90001 016 ***150.00

DOCUMENT # P9B000015280

1. Corporation Name

THE ANIMAL CONNECTION OF PANAMA CITY BEACH, INC.

Principal Place of Business

Mailing Address

2101 JOAN AVE.
PANAMA CITY BEACH, FL. 32408

2101 JOAN AVE
PANAMA CITY BEACH, FL. 32408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/17/98

4. FEI Number

59-3503350

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
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 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DANIEL, Jimmie L.
2101 JOAN AVENUE
PANAMA CITY BEACH, FL. 32408

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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: Jimmie L. Daniel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/18/99 (850) 233-3008
Date Daytime Phone #

CR2E034 (1/98)



579142-90001-16
P98000015280

JUNE 18, 1999

FLORIDA DEPT. OF STATE
KATHERINE HARRIS
SECRETARY OF STATE
DIVISION OF CORPORATION

RE: DOC. # P98000015280

GENTLEMEN:

ENCLOSED PLEASE FIND OUR PROFIT CORPORATION ANNUAL REPORT. THIS IS OUR FIRST YEAR AS A CORPORATION.

I APOLOGIZE FOR BEING LATE IN FILING, BUT WE DID NOT RECEIVE A FORM TO FILE FROM YOUR DIVISION.

I DIDN'T KNOW ANYTHING ABOUT THE REQUIREMENT UNTIL I CHANGED ACCOUNTANTS AND MY NEW ACCOUNTANT ADVISED ME OF THE REPORT REQUIREMENTS.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL.

THANK YOU

Jimmie Lorraine Daniel
J. LORRAINE DANIEL
PRESIDENT

579/42-90001-16
pg 8000015280

ANIMAL CONNECTION
JENNY L DANIEL
2101 JOAN AVE
PANAMA CITY BCH, FL 32408

Request taken by: yfisher
06-15-1999

The forms you recently requested from this office are:

- (1) 201. COR Profit A/R

Should you have any questions or need any further information,
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314