

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



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

**FILED**  
**Jun 04, 1999 8:00 am**  
**Secretary of State**

06-04-1999 90008 008 \*\*\*150.00

**DOCUMENT #** 098000028341

1. Corporation Name  
Brandon Brew House Rest Inc.

Principal Place of Business Mailing Address

Brandon Brew House  
779 West Lumsden  
Brandon FL 33511

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 779 West Lumsden 26 779 West Lumsden  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 Brandon FL 27 Brandon FL  
City & State City & State  
23 33511 28 33511  
Zip Country Zip Country  
24 USA 29 USA

3. Date Incorporated or Qualified

4. FEI Number 59-3499696 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

7. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

William J. Sturtevant JR  
3268 San Jose St  
Clearwater FL 34619

10. Name and Address of New Registered Agent

81 Name William J. Sturtevant JR  
82 Street Address (P.O. Box Number is Not Acceptable)  
1027 Red Oak Circle  
83 Brandon FL  
84 City Brandon 85 Zip Code 33511

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 William J. Sturtevant JR DATE 6-29-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE President  
NAME William Sturtevant  
STREET ADDRESS 1027 Red Oak Cir  
CITY-ST-ZIP Brandon FL 33511

TITLE Vice President  
NAME Donald Weaver  
STREET ADDRESS 1801 TARA Trce  
CITY-ST-ZIP Brandon FL 33510

TITLE Susan Sturtevant Treasurer  
NAME Susan Sturtevant  
STREET ADDRESS 1027 Red Oak Cir  
CITY-ST-ZIP Brandon FL 33511

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

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: Donald Weaver V.P.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813 655-0511  
Date Daytime Phone #

CR2E034 (11/98)