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Feb 27, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P98000030796

1. Corporation Name

THE CRACKED EGG OF SPRING HILL, INC.



Principal Place of Business

14314 IRVING ST.
SPRING HILL FL 34609

Mailing Address

14314 IRVING ST.
SPRING HILL FL 34609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1998

2. Principal Place of Business

21 14314 IRVING ST

Suite, Apt. #, etc.

22

City & State

23 BROOKSVILLE, FL

Zip

24 34609

Country

25 USA

2a. Mailing Address

26 14314 IRVING ST

Suite, Apt. #, etc.

27

City & State

28 BROOKSVILLE, FL

Zip

29 34609

Country

30 USA

4. FEI Number

59-3502133

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

9. Name and Address of Current Registered Agent

HILLSMAN, GEORGE E JR.
14314 IRVING ST.
SPRING HILL FL 34609

10. Name and Address of New Registered Agent

81 Name

HILLSMAN GEORGE E JR

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

14314 IRVING ST

83

84 City

BROOKSVILLE

FL

85 Zip Code

34609

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 *George E Hillman Jr*
Signature, typed or printed name of registered agent and date if applicable.

GEORGE E HILLMAN JR

1-31-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D/P ☐ DELETE

NAME HILLSMAN, GEORGE E JR

STREET ADDRESS 14314 IRVING ST.

CITY-ST-ZIP SPRING HILL FL 34609

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR/PRESIDENT ☒ Change ☐ Addition

1.2 NAME HILLSMAN GEORGE E JR

1.3 STREET ADDRESS 14314 IRVING ST

1.4 CITY-ST-ZIP BROOKSVILLE, FL 34609

2.1 TITLE DIRECTOR/VICE PRESIDENT ☒ Change ☐ Addition

2.2 NAME HILLSMAN JERONICA M

2.3 STREET ADDRESS 14314 IRVING ST

2.4 CITY-ST-ZIP BROOKSVILLE, FL 34609

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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: *X JERONICA M HILLSMAN JERONICA M Hillman* 1-31-99 352
596-1924

CR2E034 (11/98)