

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 # P98000042067

1. Corporation Name

TAMIAMI PIZZA MANAGEMENT, INC.

Principal Place of Business

**1111 THIRD AVENUE WEST SUITE 300
BRADENTON FL 34205**

Mailing Address

**1111 THIRD AVENUE WEST SUITE 300
BRADENTON FL 34205**

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90082 037 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/08/1998

4. FEI Number

65-0840024

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$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

21 18011 S. Tamiami Tr.

2a. Mailing Address

26 P.O. Box 746

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #9

27

City & State

23 Fort Myers FL

City & State

28 Estero FL

Zip

Country

24 33908 25 USA

Zip

Country

29 33928 30 USA

9. Name and Address of Current Registered Agent

PRATHER, ALAN H

**1111 THIRD AVENUE WEST SUITE 300
BRADENTON FL 34205**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE

**D
PRATHER, ALAN H
1111 THIRD AVENUE WEST SUITE 300
BRADENTON FL 34205**

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

**DV
PRATHER, ALAN H
1111 THIRD AVE WEST SUITE 300
BRADENTON FL 34205**

2.1 TITLE ☐ Change ☒ Addition

**DP
TAYLOR, MICHAEL G
18011 S. TAMAMI TR #9
FORT MYERS FL 33908**

3.1 TITLE ☐ Change ☒ Addition

**DS
PRATHER, BEVERLY A
1111 THIRD AVE WEST SUITE 300
BRADENTON FL 34205**

4.1 TITLE ☐ Change ☒ Addition

**DT
TAYLOR JENNIFER N
18011 S. TAMAMI TR #9
FORT MYERS FL 33908**

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: **Jennifer N. Taylor** **Jennifer N. Taylor** **4/29/99** **941-590-0496**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)