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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000062661

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90064 014 ***150.00

 Corporation 	HILL COOKER, INC.	J0200 I					
Principal Place	of Business	Mailing Address				B110 81114 11818 81114 1	, , , , , , , , , , , , , , , , , , ,
12208 GENTER DRIVE 12208 GENTER DRIVE							
SPRING HILL FL 34609 SPRING HILL FL 34609					DO NOT WRITE IN T	ILIC CDACE	
					Date Incorporated or Qualifed	- IIIO OFACE	
					07/13/1998		
	ace of Business	2a. Mailing Address			4. FEI Number	H	olied For
21 537		26			59-3523001		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
City & State		City & State			.6. Election Campaign Financing	\$5.00	<u> </u>
23 SORI		28			Trust Fund Contribution	Added to	
Zip 24	34606 25 Country	Zip 3	Country		This corporation owes the current yea Personal Property Tax.	☐ Yes	KNo
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register		
01.4	(DODNE MCDUEE LAMES		81 Name	M	CDuff, JAMES C	LAY bOR	Ne
CLAYBORNE MCDUFF, JAMES			82 Street		ss (P.O. Box Number is Not Acceptable)	<u></u>	
12208 Genter Drive Spring Hill Fl 34609			-		2208 GENTER DR		
SFRI	ING HILL I C 34009		83				Ì
			84 City	$\Box Q_{\alpha}$	zing Hill 1	FL 85 Zip C	Code 9
11 Pursuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes	the above-named	corno	ration submits this statement for the numos	e of changing its i	registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligati	if Florida. Such change was auth	orized by the corpo	oration	's board of directors. I hereby accept the ap	pointment as reg	jistered
-	iii laminai wiiii, and accept the obligati	ons of, Section 007.0303, Florid	a ciatates.				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature n	equired 1			
12.	OFFICERS AND		13.	- DA	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	D D	☐ DELETE	1.1 TITLE 17	148	COUFF, JAMES C.	E Change	☐ Addition
NAME	CLAYBORNE MCDUFF, JAMES		1.2 NAME	12	208 GENTER OR		
STREET ADDRESS	12208 GENTER DRIVE		1.3 STREET ADDRESS	10	21NG HILL F1.34609		
CITY-ST-ZIP	SPRING HILL FL 34609	□ DELETE	1.4 CITY-ST-ZiP 2.1 TITLE	31	EINCHIII FI: 3400)	Change	☐ Addition
TITLE	D TUCDIALILE DOREDE I	[] DECE IE		ı		onlingo	
NAME	THERIAULT, ROBERT J 12208 GENTER DRIVE		2.2 NAME				į
STREET ADDRESS	SPRING HILL FL 34609		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP				,
CITY-ST-ZIP TITLE	OF THIT OF THE PERSON NAMED IN COLUMN	☐ DELETE	3.1 TITLE			Change	Addition
NAME .		—	3.2 NAME				
STREET ADDRESS		-	3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				İ
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP		C) believe	5.4 CITY-ST-ZIP 6.1 TITLE			☐ Change	Addition
TITLE		☐ DELETE	6.2 NAME			L_1 Ollarige	
NAME			1				
STREET ADDRESS			6.3 STREET ADDRESS		·		

14. I hereby certify that the information supplied with this filling 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/-5-99 352684 6000 Date Daylime Phone # CR2E034 (11/9)