
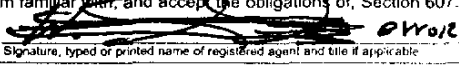


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0056023

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000065750					
1. Corporation Name SWAMP FOX, INC.					
Principal Place of Business 158 WAKULLA ARRAN RD CRAWFORDVILLE FL 32326			Mailing Address P O BOX 518 CRAWFORDVILLE FL 32326		
2. Principal Place of Business		2a. Mailing Address			
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.			
22 City & State		27 City & State			
23 Zip		28 Country		29 Zip	
24		25		30	
9. Name and Address of Current Registered Agent					
OAKS, W. DAN 158 WAKULLA ARRAN RD CRAWFORDVILLE FL 32326					
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  DATE 07/27/1998					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
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					

FILED
99 MAR 29 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/27/1998	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 621752558	Additional Fee Required \$8.75
5. Certificate of Status Desired <input type="checkbox"/>	May Be Added to Fees \$5.00
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
8. This corporation owes the current year Intangible Personal Property Tax <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Name and Address of New Registered Agent	

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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*****150.00 ***150.00**

CR2E034 (11/98)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/99

926-4752

Date

Daytime Phone