PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000078824

1. Corporation Name

BUCKAWOLV, INC.

Principal Place of Business
38 GARDEN DRIVE

DELAND FL 32724

Mailing Address

38 GARDEN DRIVE DELAND FL 32724

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90240 004 ***150.00



DO NOT WRITE IN THIS SPACE

						09/11/1998				
2. Principal P	Principal Place of Business 2a. Mailing Address					4. FEI Number	Α	pplied For		
21		26	-			59-3532460	N	ot Applicable		
Suite, Apt.	#, etc.	S 27	iuite, Apt. #, etc.			5. Certifcate of Status Desired		Additional equired		
	0		City & State			6. Election Campaign Financing	\$5:00	May Be		
23		28	, -			Trust Fund Contribution	•	to Fees		
Zip	Country			Country		8. This corporation owes the current year Intangi	ble			
24	_ `	29	30	<u>, </u>		Personal Property Tax. ✓ Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
	-			81	Name					
	PPER, JEREMY A			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		<u></u>		
· ·	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address of New Registered Agent 13. Name 14. City 15. Name 16. Name and Address of New Registered Agent 16. Name and Address of New Registered Agent 17. Name and Address of New Registered Agent 18. Name 18. Name 18. Street Address (P.O. Box Number is Not Acceptable) 18. Address of New Registered Agent 18. Name 18. Name 18. Name 18. Name 18. Name 18. Address of New Registered Agent 18. Name 19. Name									
DEL	AND FL 32724			83						
					Dis.		حا ۳۱۰	Code		
				84	City	FL °	5 210	Coue		
l office or r	egistered agent, or both, in the State of	Florida.	. Such change was auth	ionzed by	the corpora	rporation submits this statement for the purpose of cha tion's board of directors. I hereby accept the appointment	nging it ent as r	s registered egistered		
SIGNATURE		_				DATE				
40			·		nt signature requi	,	IRECT	ORS IN 12		
12.		DIRECT				a company of the comp				
TITLE	D COORED IEDERAN A		[_] OCCC14	ł				_		
NAME)				T 4 D D D C C C					
STREET ADORESS										
CITY-ST-ZIP			☐ DELETE		ST-ZIP		Change	Addition		
TITLE	D		[] DECETE	2.1 TITLE			,			
NAME	MARSHALL, MARY J			2.2 NAME						
STREET ADDRESS	38 GARDEN DRIVE			J	TADDRESS					
CITY-ST-ZIP	DELAND FL 32724	- 2-4 : 2	DELETE	2.4 CITY- 3.4 TITLE:			1 Channe	Addition.		
-TITLE										
NAME				3.2 NAME	T 40000000					
STREET ADDRESS					TADORESS					
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NAME				l	Ļ					
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STREET ADDRESS				5.4 CITY-5						
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TITLE			₩ DELETE	6.2 NAME	ļ		,go			
NAME	į				T ADDRESS					
STREET ADDRESS					i i					
CITY-ST-ZIP	1			6.4 CITY-5	1-2P					

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

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