FOR PROFIT CORPORATION

UI	NIFORM BUSINE	SS REPORT	(ORK)	<u>.</u>			
DOCUMENT # P99000059220 1. Entity Name 3URV'S 14-H GOLD, 1NC. 105 E. GREEN ST. PERRY EL 32347				FILED SECRETARY OF STATE DIVISION OF CORPORATIONS			
155 E. GREEN ST.					02 AUG 29 PM 1: 37		
	OO NOT WRITE	Ar ar 🌞	PACE	A			
	JO NO! WINIE		AOL .			•	
2. Principal Place of Business 105 E. GREEN S.T. Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THI	S SPACE	
Suite, Apt. #, etc.							
City & State	1	City & State PERRY FLOR			FEI Number Applied For 59-3591110 Not Applicable		
PERR Zip	Country	Zip	Country		Certificate of Status Desired	\$8.75 Additional	
3234	7 TAYLOR	32348	TAYLOR			Fee Required	
			Name	7. Na	me and Address of Current Register	ed Agent	
DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its reg			Street Add	DAVID T, PATE, TR. Street Address (P.O. Box Number is Not Acceptable) 1.0.5 E. G.R.E.E.M. S.T.			
			City	PERRY			
9. This corpo	Signature, typed or printed name of registered agent ration is eligible to satisfy its Intangible equirement and elects to do so.	January 1 - M After May Amende	lay 1 Fee is \$150.0 1, Fee is \$550.00 1 UBR is \$61.25	\$550.00 10. Election Campaign Financing \$5.00 May Be Added to Fees			
11.	OFFICERS AND	Make Check Payab	ne to Department (oi State	60000742	76167	
TITLE	PRESIDENT		THILE	*****300.00 ****150.00			
NAME	DAVID T. PATE, IR.		NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	105 E. GREEN ST. PERRY FL 37347		· CITY-ST-ZIP				
TTLE	DIRECTOR		TITLE	· · · · · · · · · · · · · · · · · · ·		1	
NAME	EDWINA G. PATE 105 E. GREEN ST.	NAME STREET ADDRESS		ж Р			
STREET ADDRESS CITY-ST-ZIP	PERRY FL 32347	CITY-ST-ZIP			٠.		
TILE			TITLE				
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP	DO NOT WRITE			
TITLE			TITLE NAME		IN THIS SPA	CF	
NAME STREET ADDRESS	Top I			117110 017102			
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NAME CORECT ADDRESS			NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP				
13. I hereby c	ertify that the information supplied with	this filing does not qualify for	r the exemption state	d in Section	119.07(3)(i), Florida Statutes. I further of	certify that the information	

indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-02. 850-584-3669

CR2E034B (12/01)

I series rescived the Uniform

Business Report for Graves Drive-In, Inc.

nor Judy's 14-4 Gold, Inc.

agenta - "

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Navil T. Pate 8-29-02