

FILED
Jul 02, 2007 8:00 am
Secretary of State

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05-14-2007 90082 002 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000091000			
1. Entry Name SUBWAY BRITANNICA V INC.			
Principal Place of Business 2171 N DAVIS HWY UNIVERSITY MALL #3 PENSACOLA, FL 32514		Mailing Address PO BOX 607 MILTON, FL 32572	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3804278		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEEDS, JEFF PO BOX 607 MILTON, FL 32572		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reconstituting)			
DATE _____		DATE _____	
FILE NOW! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
P LEEDS, JEFFREY PO BOX 607 MILTON, FL 32572			
S LEEDS, HOLLY A 6666 EDINBURGH DR. MILTON, FL 32571			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____		Date: 4/30/07 850 232-6015	
Typed Name of Signing Officer or Director		Typed Name #	



6-18-07