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

Mailing Address

1RVING TX 75063

2a. Mailing Address

Suite, Apt. #, etc.

26

ATTN: TAX DEPARTMENT

7890 BENT BRANCH DRIVE. SUITE 100

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

2. Principal Place of Business

27001 US 19 NORTH

CLEARWATER FL 34621

Suite, Apt, #, etc.

SPACE #2026

21



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S00178 1. Corporation Name

COUNTRYSIDE FAN CLUB, INC.

5. Certifcate of Status Desired П Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Zip Country Zip 8. This corporation owes the current year Intangible □No 30 Personal Property Tax. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 82 1201 HAYS STREET **SUITE 105** 83 TALLAHASSEE FL 32301 Zip Code 85 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required wh ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS □ Change ☐ DELETE 11 TITLE TITLE 12 NAME NAME PARKS, RALPH T. 7880 BENT BRANCH DR #100 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP IRVING TX CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 2.1 TITLE TITLE 2.2 NAME ROACH, DONALD V NAME STREET ADDRESS 7880 BENT BRANCH DR #100 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP IRVING TX 75063 CITY-ST-ZIP DELETE Change ☐ Addition 31 TITLE TITLE GOTOIW J YORAG 32 NAME MAYER, MARK W NAME 3.3 STREET ADDRESS 7880 BENT BRANCH DR #100 STREET ADDRESS IRVING TX 3.4. CITY-ST-ZIP CITY-ST-ZIP hange ☐ Addition ☐ DELETE 4.1 TITLE TITLE VIKKI RODRIGUEZ WINTON, NANCY L 4.2 NAME NAME 7880 BENT BRANCH DR #100 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP IRVING TX 75063 CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE VP/D aharnes m. Albert 5.2 NAME NAME TOO BENT BRANCH DR. \$100 5.3 STREET ADDRESS STREET ADDRESS 54 CITY+ST-ZIP IRVING TX 16063 CITY-ST-ZIP ☐ Change ☐ Addition 6.1 TITLE □ DELETE TITLE 6.2 NAME NAME

6.3 STREET AODRESS

6.4 CITY-ST-ZIP

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

FILED Mar 01, 1999 8:00 am **Secretary of State**

03-01-1999 90052 021 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Not Applicable

3. Date incorporated or Qualifed

09/17/1990

04-3105274

4. FEI Number

CR2E034 (11/98)

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. NANCY L. WINTON

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF