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

PROFIT CORPORATION ANNUAL REPORT 1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(9)

Secretary of State

FILED

May 01 1998 8:00am

E AND	E COUNTRYSIDE, INC.					
Principal Place	e of Business	Mailing Address			- I TODUNUN TAD CONTROL BOLD STORE STORE STORE BEDEL BURGE BURGE BURGE BURGE BURGE	
9131 N. MC MULLEN BOOTH RD CLEARWATER FL 34621		3131 N. MC MULLEN BO	3131 N. MC MULLEN BOOTH RD CLEARWATER FL 34621			
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/18/1991	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26	26		59-2698727 Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional	
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23 Zin	Country	28]	Countr		Trust Fund Contribution Added to Fees	
Zip 24	26	Zip	├ ──¬	У	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
241	g. Name and Address of Curr	29 ant Registered Agent	30		10. Name and Address of New Registered Agent	
eti.	ECKLER, ERIC A		81	Name		
	BI N. MC MULLEN BOOTH RD	•	-			
	•	82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
V	EARWATER FL 34621		83			
			84	1 00.	85 Zip Code	
			[8 ⁴⁴	City	FL 85 Zip Code	
office or re agent. I at SIGNATURE					poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
10	Signature, typed or printed name of registered in	NO DIRECTORS	13.	jeni signalure requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	PD	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	STECKLER, ERIC A		1.2 NAME			
STREET ADDRESS	3131 N. MC MULLEN BOO	TH RD		T ADORESS		
CITY-ST-ZIP	CLEARWATER FL 34621		1.4 CITY - ST - ZIP			
TITLE		DELETE 2.1 T			Change Addition	
NAME			2.2 NAME			
STREET ADDRESS	:ss		2.3 STREET AODRESS			
CITY-ST-ZIP			2.4 CITY	-ST-ZIP		
TITLE	DELETE		3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	· —	DELETE	3.4. CITY		Change Addition	
TITLE		FT DEFEIF	41 TITLE	ľ	Li cuange Li Addition	
NAME CTOCCT ADODESC			4.2 NAM	T ADDRESS		
STREET ADDRESS			4.4 CITY-			
CITY-ST-ZIP TITLE		☐ DELETÉ	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			54 CiTY-	ST-ZIP		
TITLE			61 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP		···	6.4 CITY			
14. I hereby of indicated	certify that the information supplied on this annual report or supplement director of the corporation or the second	with this filing does not qualify for that annual report is true and according or trustee amnowered to	or the exem- curate and the	ption stated in hat my signati	n Section 119 07(3)(i), Florida Statutes, I further cently that the information ure shall have the same legal effect as if made under oath; that I am an juired by Chapter 607, Florida Statujes; and that my name appears in	
Block 12	or Block 13 if changed, or on an at	tachment with an address	13	91)	quied by Chapter doy, Horse Standard, and that my hame appears in	