

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 26, 1999 8:00 am
Secretary of State

03-26-1999 90023 018 ***150.00

DOCUMENT # V10184

1. Corporation Name

THE SHARPENING SHACK, INC.

Principal Place of Business

1913 N. HARTMAN RD.
AVON PARK FL 33825
US

Mailing Address

P.O. BOX 386
AVON PARK FL 33825
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1992

4. FEI Number

59-3118876

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 1071 LaBelle Vista S.E.

Suite, Apt. #, etc.

22 City & State

23 Fort Myers, FL
Zip Country

24 33905

25

2a. Mailing Address

26 1071 LaBelle Vista S.E.

Suite, Apt. #, etc.

27 City & State

28 Fort Myers, FL
Zip Country

29 33905

30

9. Name and Address of Current Registered Agent

BROWN, MARK D

~~1913 NORTH HARTMAN ROAD~~
~~AVON PARK FL 33825~~

1071 LaBelle Vista, S.E.
Fort Myers, FL 33905

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Change of address only same agent

March 23, 1999

12. OFFICERS AND DIRECTORS

TITLE DPVT
NAME BROWN, MARK D
STREET ADDRESS 1913 N. HARTMAN ROAD
CITY-ST-ZIP AVON PARK FL

☐ DELETE

TITLE SD
NAME BROWN, BONNIE R
STREET ADDRESS 1913 N. HARTMAN RD.
CITY-ST-ZIP AVON PARK FL 33825

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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: *Mark D Brown*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRESIDENT

Mar. 23, 1999

941-694-7960

CR2E034 (11/98)