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

DOCUMENT

1. Corporation Name The

Stable At SAWGRASS INC

V14662 Mailing Address

Principal Place of Business

CITY-ST-ZIP

4185 Carbia Rd St. Aug FlA 32092

DO NOT WRITE IN THIS SPACE

Jun 24, 1999 8:00 am

Secretary of State

06-24-1999 90010 013 ***158.75

4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution 23 Country Zip Country Zip 8. This corporation owes the current year Intangible °⊡No 25 30 Personal Property Tax. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Me DONALD JANET MISKINIS June 82 4185 CORDIN Rd St Aug FlA 32092 83 84 City C 7 Code 3209 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 objections of Section 607.8505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) end title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 12. OFFICERS AND DIRECTORS 13. President Change ☐ Addition TITLE DIRECTOR DELETE 1.1 TITLE JANUT MISKINIS June MSDONALD NAME 1.2 NAME 4185 Corbing Rd. 5+ Aug FlA 32092 V. P. 27900 MARCH LANdING PWY 1.3 STREET ADDRESS STREET ADORESS Powte UEDRA ELA CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition _] Change DELETE 2.1 TITLE TITLE Jeffrey S. LINZ 2.2 NAME NAME 4185 Corbing Rd 2.3 STREET ADDRESS STREET ADDRESS ST Aug FIA 32092 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DELETE ☐ Change 3.1 TITLE TITLE Sectorey S. Linzy 3.2 NAME NAME 4185 CORDIN Rd 3.3 STREET ADDRESS STREET ADDRESS Aug FlA 32092 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE JANET MISKINIS 4. 2 NAME NAME 4185 Corbin Rd 32092 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 arn 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: x()

CR2E034

V14662 579367-90010-13

Donothis

JANICE STABLES 4185 CORBIN RD ST AUGUSTINE,FL 32092 Vanit Miskinis C/o Sangrass Stables

Request taken by: yfisher 06-02-1999

The forms you recently requested from this office are:

(1) 201. COR Profit A/R

Should you have any questions or need any further information, please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314