## 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 # **V32442**

1. Corporation Name

BIG BLUE SPRINGS, INC.

_						
Principal Place of Business	Mailing Address					
1771 46TH STREET NORTH ST PETERSBURG FL 33713	1771 46TH STREET NORTH ST PETERSBURG FL 33713					
		i				
2. Principal Place of Business	2a. Mailing Address					

DO NOT WRITE IN THIS SPACE

**FILED** 

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90067 046 \*\*\*150.00

								04/29/1992					
2. Principal F	Place of Business	2a	, Mailing Address					4. FEI Number			App	olied For	
21		26						59-3128999			Not	Applicable	
Suite, Apt	#, etc.		Suite, Apt. #, etc.			-		5. Certifcate of Status Desired			<b>75</b> °A e Rec	dditional ruired	
22 City 9 Str		27	City & State					• Flatin Openius Financias					
City & Sta	te .	-	City & State					Election Campaign Financing     Trust Fund Contribution				May Be Fees	
23	Country	28	Zîp	Cor	intov			<del></del>	ont was late			7 1 003	
Zip			, ·				8. This corporation owes the current year Intangible Personal Property Tax.   ☐ Yes ☐ No						
24	9. Name and Address of Current	Pogle	rtered Agent	30]	_			0. Name and Address of New R	Registered /	<u> </u>			
	9. Name and Address of Current	regis	stered Agent		81	Name	<u>·</u>	<u> </u>					
SHE	ELTON, RICHARD L												
	1 46TH STREET NORTH				82	Street A	Address	(P.O. Box Number is Not Accepta	able)				
	PETERSBURG FL 33713				83	<del> </del>							
011					33								
	-				84	City			FL	85	Zip C	ode	
	<u> </u>				L,	<u> </u>				1			
agent, i a	t to the provisions of Sections 607.0502 registered agent, or both, in the State c am familiar with, and accept the obligate	f Flori ions of	da. Such change was au f, Section 607.0505, Flor	uthorize rida Stat	d by lutes	the corpor	oration's	board of directors. I hereby accept	я те аррог	ument	as reg	istered	
SIGNATURE	Signature, typed or printed name of registered agent	and title	if applicable. (NOTE:	Registered	Agen	t signature rec	equired who	n reinstating)	DATE				
12.	OFFICERS AND	DIRE	ECTORS	13.				ADDITIONS/CHANGES TO OF	FICERS AN				
TITLE	D		DELETE	1.1 T	MLE.			··· <del>-</del>		Ch:	ange	Addition	
NAME	SHELTON, RICHARD			1.2 N	AME	Ì							
STREET ADDRESS	ATTA ACTIL OTDECT NO			1.3 \$	TREET	ADDRESS							
CITY-ST-ZIP	ST PETERSBURG FL				ΠY-\$1			>					
TITLE	D		☐ DELETE	2.1 T						Chi	ange	Addition	
NAME	WEAVER, SAMMY J			2.2 N	AME	Į							
STREET ADDRESS	ATAL SACT OFFICE					ADDRESS		•					
CITY-ST-ZIP	OCALA FL			2.40	TY-S	T-ZIP	-	+ =					
TITLE	D		DELETE	3.1 Ti		<del></del>				Ch	ange	☐ Addition	
NAME	HAUSER, CLAYTON			3.2 N	AME	ļ							
STREET ADDRESS	TARA ANTIL OTDEET N.C.					TADDRESS							
	ST PETERSBURG FL			ŀ	CITY-S								
CITY-ST-ZIP	OT PETERIODOMA PE		DELETE	4.1 1					<del></del>	□ Ch	ange	☐ Additio	
NAME					VAME			<b>\</b>			•		
STREET ADDRESS						ADDRESS		-					
	3				ITY-S								
CITY-ST-ZIP TITLE			DELETE	5.1 Ti		1-21				Ch	ange	☐ Additio	
l	}			5.2 N				•		_	-		
NAME						ADDRESS							
STREET ADDRESS	5				ITY-ST								
CITY-ST-ZIP	<del>                                     </del>		DELETE	6.1 T		- 21				□ Ch	ange	Additio	
TITLE	Containing an above.		D OCCES	6.2 N									
						ADORESS							
	s in contract that												
CITY ST-ZIP	" Maria T			6.4 C	ITY-\$1	T-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 13 if changed or or an attachment with an address, with all other like empowered.

SIGNATURE: