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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V69745

(0)

RICK'S SIX. INC.

	31A, 114O			I LOGAN ATTONO ANKA TOMIK LOGAN ATARA SIMI PROM BU	ALL ALDIN ALDIN BIANI BIANI ADDI
	VIII. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				
Principal Place	e of Business	Mailing Address		i iå bli dirata gitië sësti dëbit asagt ant atkit di	fili Mèdil 6464 dilili Atali esal
1118 8TH AVE W 1118 8TH AVE W PALMETTO FL 34221 PALMETTO FL 34221-3810					
					Date of Last Report 15/01/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0346625	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23	*** *** · · · · · · · · · · · · · · · ·	28	Ţ~··	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangi	
24	9. Name and Address of Curr	29 29 Agent	30	Florida Statutes Yes 10. Name and Address of New Registere	No No
DICK		on negistered Agent	81 Name	10. Harris and Address Of New Yorkston	pu ngun
	ILY, STEPHEN CHRISTIAN				
1118 8TH AVE W PALMETTO FL 34221			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
r ALF	METTO PE 04221		83		
			84 City		. 85 Zip Code
			""	F	- L '
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statut	es, the above-named co	orporation submits this statement for the purposi ration's board of directors. I hereby accept the s	e of changing its registered
agent. La	m familiar with, and accept the ob	ligations of, Section 607.0505, FI	orida Statutes.	parents board of directors. Thoroby according to	appointment as regions of
SIGNATURE					
12.	Signar ire, typied or printed name of registered OFFICERS 4	AND DIRECTORS	E: Registered Agent signature red	Quired when reinstating) DATI ADDITIONS/CHANGES TO OFFICERS A	
DILE	PD	DELETE	1.1 7/TLE	ADDITIONO/OFFANGES TO OFFICENS A	Change Addition
NAME	JONES, KAREN R	—	1.2 NAME		
STREET ADDRESS	1118 8TH AVE W		1.3 STREET ADDRESS		
City-\$1-zip	PALMETTO FL		1.4 CITY-ST-ZIP		
THUE	VSD	DELETE	2.1 TITLE		Change Addition
NAME	RICKLY, STEPHEN C		2.2 NAME		·
STREET ADORESS	2200 8TH ST W		2.3 STREET ADDRESS		
Cify+ST-Zi₽	PALMETTO FL		2.4 City-St-ZiP		
TITLE	DIRALTOR	DELETE	3.1 TITLE		Change Addition
NAMÉ	All B David	<i>t.</i> .	3.2 NAME		
STREET ADDRESS	WILLIAM BY KIEK	7	3.3 STREET ADDRESS		
CrTY+S1+ZIP	7508 (7/3 3/ 4	- 1221	3.4. CITY-ST-ZIP		
TITLE	William B. Ricks 1308 1773 ST 4 PalmyTTO FG ?	DELETE	4.1 TITLE		Change Addition
NAMê			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY - S1 - ZIP			4.4 CITY-ST-ZIP		
TILE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY - ST - ZIF			5.4 CITY+ST-ZIP		
THLE		☐ DELETE	61 TITLE		Change Addition

14. I do hereby certify that the information supplied with his 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.

6.3 STREET ADDRESS

62 NAME

SIGNATURE

NAME

STREET ADDRESS

SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/9

941-722-3788

Daylime Phone II

FILED

Apr 28 1997 8:00am

Secretary of State

E034 (9/96)