

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Moulam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000061997 (9)**

1. Corporation Name

LAKEWOOD PARK LIQUORS & PUB, INC.



Principal Place of Business

9604 CORTEZ ROAD WEST
SUITE 227
BRADENTON FL 34210

Mailing Address

9604 CORTEZ ROAD WEST
SUITE 227
BRADENTON FL 34210

2. Principal Place of Business

2a. Mailing Address

21 4902 N
State, Apt. #, etc.
22 Kings Highway
City & State
23 Fort Pierce FL
Zip
24 34951 25 USA
Country

26
State, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

3. Date Incorporated or Organized

08/10/1995

3a. Date of Last Report

4. FEI Number

65-060-8854

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent

81 Name **RICHARD LONG**
82 Street Address (P.O. Box Number is Not Acceptable)
9604 CORTEZ Rd west
83 **# 227**
84 City **BRADENTON** FL 85 Zip Code **34210**

11. Pursuant to the provisions of Sections 602.06(2) and 602.15(4), 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 I accept the obligations of, Section 602.06(2), Florida Statutes.

SIGNATURE

Richard Long *Richard Long* 29-96

12. OFFICERS AND DIRECTORS

1. TITLE	D	<input type="checkbox"/> DELETE
2. NAME	LONG, RICHARD L	
3. STREET ADDRESS	P.O. BOX 7222 N/A	
4. CITY, STATE, ZIP	BRADENTON FL 34210	
5. TITLE		<input type="checkbox"/> DELETE
6. NAME		
7. STREET ADDRESS		
8. CITY, STATE, ZIP		
9. TITLE		<input type="checkbox"/> DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, STATE, ZIP		
13. TITLE		<input type="checkbox"/> DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, STATE, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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.

SIGNATURE: *Richard Long* **RICHARD LONG** 29-96 941-792 9613
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)