

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 Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90011 005 ***150.00

DOCUMENT # F05767

1. Corporation Name S. GAGER INDUSTRIES, INC.

Principal Place of Business C/O J. QUINTON RUMPH 11436 PHILLIPS HWY JACKSONVILLE FL 32256-1636



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/18/1980
4. FEI Number 59-2040980
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.

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent RUMPH, J. QUINTON 11436 PHILLIPS HWY JACKSONVILLE FL

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE P GAGER, FOREST
NAME GAGER, FOREST
STREET ADDRESS 11436 PHILLIPS HWY
CITY-ST-ZIP JACKSONVILLE, FL 00000
TITLE TD GAGER, LINDA D
NAME GAGER, LINDA D
STREET ADDRESS 11436 PHILLIPS HWY
CITY-ST-ZIP JACKSONVILLE, FL 00000
TITLE C GAGER, LAWRENCE J JR
NAME GAGER, LAWRENCE J JR
STREET ADDRESS 11436 PHILLIPS HWY
CITY-ST-ZIP JACKSONVILLE, FL 00000
TITLE VP GAGER, GEORGE B
NAME GAGER, GEORGE B
STREET ADDRESS 11436 PHILLIPS HWY
CITY-ST-ZIP JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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: Forest Gager 1-20-99 (904) 268-6787

CR2E034 (1/98)