

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 12:13

DOCUMENT # H02920

(7)

1. Corporation Name

EAGAN & ASSOCIATES, INC.

Principal Place of Business

515 JENNIFER LANE
WINDERMERE FL 34786
US

Mailing Address

515 JENNIFER LANE
WINDERMERE FL 34786

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/09/1984

3a. Date of Last Report
05/11/1994

2. Principal Place of Business

2a. Mailing Address

4. FBI Number
59-2663715

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EAGAN-LITVANY, SANDRA R.
515 JENNIFER LANE
WINDERMERE FL 34786

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. 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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Sandra R. Litvany

2/9/95

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when (re)appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME EAGAN-LITVANY, SANDRA R.
STREET ADDRESS 515 JENNIFER LANE
CITY-ST-ZIP WINDERMERE FL

1.1 TITLE PD
12 NAME LITVANY, SANDRA
13 STREET ADDRESS 515 JENNIFER LANE
14 CITY-ST-ZIP WINDERMERE, FL 34786

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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)(b), 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. 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, changed, or on an attachment with an address.

SIGNATURE:

Sandra Litvany
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/95 407-895-1212