

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 Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90243 001 ***150.00

DOCUMENT # 218784

1. Corporation Name BAGWELL LUMBER CO OF AVON PARK INC



DO NOT WRITE IN THIS SPACE

Principal Place of Business: THOMAS W BAGWELL 18 S BUTLER AVE AVON PARK FL 33825

Mailing Address: THOMAS W BAGWELL 18 S BUTLER AVE AVON PARK FL 33825

3. Date Incorporated or Qualified 01/01/1959

4. FEI Number 59-0811709 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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 21 309 West Pleasant St

2a. Mailing Address 26 PO Box 1116

22 Avon Park, FL

27 Avon Park, FL

24 33825 25 Highlands

29 33826-1116 30 Highlands

9. Name and Address of Current Registered Agent BAGWELL, THOMAS W 20 S. BUTLER AVENUE AVON PARK FL 33825

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

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETED checkbox. Rows include Gary L. Bagwell, Lois W. Bagwell, and Thomas W. Bagwell.

Table with 5 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and Change/Addition checkboxes. Rows 1.1-1.4 are empty.

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: Thomas W. Bagwell 1-22-99 941-453-3168

CR2E034 (11/98)