

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
Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90021 024 ***158.75

DOCUMENT # 226082

1. Corporation Name

Mager Corporation

Principal Place of Business

3335 Bright Ave
Jacksonville, FL 32205

Mailing Address

3335 Bright Ave
Jacksonville, FL 32205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1959

4. FEI Number

59-0872861

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 3335 Edgewood Ave N
Suite, Apt. #, etc.

2a. Mailing Address

26 3335 Edgewood Ave N
Suite, Apt. #, etc.

22 City & State

23 Jacksonville FL

24 32205 25 Duval

27 City & State

28 Jacksonville, FL

29 32254-1192 30 Duval

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Sandler, Neil R.
3335 Bright Ave.
Jacksonville, FL 32205

81 Name

82 Lavalley, Jeffery L

83 Street Address (P.O. Box Number is Not Acceptable)

3335 Edgewood Ave

84 City

Jacksonville

FL

85 Zip Code

32205

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.

Jeffery Lavalley

3-30-99

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/D ☒ DELETE
NAME Sandler, Neil R
STREET ADDRESS 3335 Bright Ave
CITY-ST-ZIP Jacksonville FL 32205

TITLE S/D ☒ DELETE
NAME Sandler Bonnie F
STREET ADDRESS 3335 Bright Ave
CITY-ST-ZIP Jacksonville, FL 32205

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME Lavalley, Jeffery L
3.3 STREET ADDRESS 3335 Edgewood Ave N.
3.4 CITY-ST-ZIP Jacksonville, FL 32205

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME S/D Lavalley, Katherine W.
4.3 STREET ADDRESS 3335 Edgewood Ave N
4.4 CITY-ST-ZIP Jacksonville FL 32205

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffery Lavalley, Pres.

Date

3-30-99

Daytime Phone #

904-356-0026

CR2E034 (11/98)