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May 10, 1999 8:00 am
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05-10-1999 90064 032 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 539235

1. Corporation Name K.V. MCHARGUE, INCORPORATED

Principal Place of Business HIGHWAY 27 EAST P.O. BOX 448 PERRY FL 32347

Mailing Address HIGHWAY 27 EAST P.O. BOX 448 PERRY FL 32347

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/13/1977

4. FEI Number 59-1759603 Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCHARGUE, JAMES K 211 EAST HAMPTON SPRINGS PERRY FL 32348

81 Name JAMES K. MCHARGUE

82 Street Address (P.O. Box Number is Not Acceptable) 2533 U.S. 27 SOUTH

84 City PERRY

85 Zip Code FL 32347

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 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include titles and names for James K. Mchargue, K.V. Mchargue, Jamie S. Mchargue, and Jamie S. Mchargue.

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: James K. Mchargue

4/30/99

Date

Daytime Phone #

CR2E034 (1/98)