

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2007 08:00 A
Secretary of State

DOCUMENT # 602890

1. Entity Name
**DUGGAN, JOINER & COMPANY, P.A., CERTIFIED
PUBLIC ACCOUNTANTS**



Principal Place of Business

**334 NW 3RD AVENUE
OCALA, FL 34475**

Mailing Address

**334 NW 3RD AVENUE
OCALA, FL 34475**

DO NOT WRITE IN THIS SPACE



04102007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1349759

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STAFFORD, FRANK E JR
334 N.W. 3RD AVE.
OCALA, FL 34475**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME STAFFORD, FRANK E
STREET ADDRESS 334 N.W. 3RD AVE.
CITY-ST-ZIP Ocala, FL 34475

TITLE VP
NAME FURMAN, EDWARD J
STREET ADDRESS 334 N.W. 3RD AVE
CITY-ST-ZIP Ocala, FL 34475

TITLE T
NAME O.H., DANIELS JR.
STREET ADDRESS 334 N.W. 3RD AVE.
CITY-ST-ZIP Ocala, FL 34475

TITLE S
NAME BLEDSOE, R. PHILLIP
STREET ADDRESS 334 NW 3RD AVE
CITY-ST-ZIP Ocala, FL 34475

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000701751
04/20/07-80071-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank E. Stafford, Jr. / **FRANK E. STAFFORD, JR.**

4/11/07

352-732-0171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #