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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G28932

1. Corporation Name

TAGG MANAGEMENT & REALTY, INC.

Principal Place of Business Mailing Address					
8838 WENDY LANE S 8838 WENDY LANE S					
WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33			11		
US US					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
	<u> </u>	<u> </u>	•		03/17/1983 -
Principal Place of Business Za. Mailing Address					4. FEI Number Applied For
21 26					59-2271424 Not Applicable
Suite, Apt.	Suite, Apt. #, etc.	e, Apt. #, etc.		5. Certificate of Status Desired Security Securi	
		27			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax
24	25		30		Tursonar Topsky Tax
	9. Name and Address of Current	Registered Agent	8-	Name	10. Name and Address of New Registered Agent
TAC	C DONNA M		°	Name	·
TAGG, DONNA M			82	2 Street A	Address (P.O. Box Number is Not Acceptable)
8838 WENDY LANE SO. W PALM BCH FL 33411					
W P	ALM BUT PL 33411		83	5	
			84	City	85 Zip Code
	<u> </u>				FL S E F S E F S E F S E F F S E F F E F F F F F F
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 a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flori	ida Statute	s.	oralion a board of directors in those of december and appearance a
SIGNATURE	•				
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOTE:		ent signature re	required when reinstating) DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	TAGG, DONNA M.		1.2 NAME		
STREET ADDRESS	8838 WENDY LANE SO.		1.3 STREE	ET ADDRESS	
CITY-ST-ZIP	W. PALM BEACH FL		1.4 CITY-	ST-ZIP	
TITLE	VD .	☐ DELETE	2.1 TITLE	İ	☐ Change ☐ Addition
NAME	DELANEY:TAYLOR, BARBARA	- ,	2.2 NAME		ا الله المحمد الرحيد الله الله الله الله
STREET ADDRESS	12744 MEADOWBREEZE DR		2.3 STREE	ET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL		2. 4 CITY	ST-ZIP	
TITLE	STD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	TAYLOR, EDWIN		3.2 NAME	.	
STREET ADDRESS	12744 MEADOW BREEZE DR		3.3 STREE	ET ADDRESS	
CITY-ST-ZIP	W PALM BCH, FL 00000		3.4. CITY-	ST-ZIP	
TITLE	,	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	·		4. 2 NAME	:	
STREET ADDRESS		,	4.3 STRE	ET ADDRESS	
CITY-ST-ZIP	-	•	4.4 CITY-		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		• •
STREET ADORESS			5.3 STRE	ET ADDRESS	
			5.4 CiTY-	ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	: Ì	
STREET ADDRESS				ET ADDRESS	
SIRCEL AUUNTOS					

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP