# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT # G76154

1. Entity Name HAGAN AND MILEY, INC.



Principal Place of Business

17840 CHESTERFIELD ROAD N. FT. MYERS, FL 33917

Mailing Address

17840 CHESTERFIELD ROAD N. FT. MYERS, FL 33917

## **FILED** Feb 13, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

02032004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2360650

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILEY, DONNA J. 17840 CHESTERFIELD ROAD N. FT. MYERS, FL 33917

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8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or i	egistered agent, or bo	ith, in the State of Florida, I am familiar	with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	rappicatrie. (NOTE: Régistered	Ageirt signatur	e required when reinstating?	OATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	<ol> <li>Election Campaign Finan Trust Fund Contribution.</li> </ol>	cing	\$5.00 May Be Added to Fees	000000051067 02/16/04-80036-025	150.00
TIPLE NAME STREET ADDRESS CHY-ST-ZIP	OFFICERS AND DIRECT PDV MILEY, STEPHEN K. 17840 CHESTERFIELD RD NO FT. MYERS, FL	TORS	grima ir			
TITLE NAME STREET ADDRESS CREY-ST-ZP	ST MILEY, DONNA J. 17840 CHESTERFIELD ROAD N. FT. MYERS, FL		x x t		attra fila eren a gergatektura eri eri eri eri eri Birrin eri	t i tra es trattatados significados es estretente en el como en el La como en el como en e
TITLE NAME STREET ADDRESS CHTY-ST-ZIP					NOT WRITE	, 10
BITE E SAME STREET ADDRESS CXTY-ST-ZIP				IN.	THIS SPACE	
BILE NAME STREET ADDRESS STY-ST-ZP						,
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:			

12. 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 report or suppliemental report is true and accurate and that my signature shall have the same logal 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.

**GNATURE:**