

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
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90052 042 ***150.00

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DOCUMENT # J26348

1. Corporation Name
E. DUGGAR, INC.

Principal Place of Business
4141 APALACHEE PKWY.
TALLAHASSEE FL 32311-4130

Mailing Address
4141 APALACHEE PKWY.
TALLAHASSEE FL 32311-4130

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1986

4. FEI Number
59-2700647

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

2a. Mailing Address

21 1480 Timberlane Rd.

26 1480 Timberlane Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 Tall FL USA

City & State

28 Tall, FL

Zip

Country

24 32312

25

Zip

Country

29 32312

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUGGAR, S.E.
2018 CHATSWORTH WAY
TALLAHASSEE FL 32308

New Address
→

81 Name Dugger SE

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

83 3457 Paces Ferry Rd

84 City Tallahassee

FL

85 Zip Code 32308

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME DUGGAR, S.E.
STREET ADDRESS 2018 CHATSWORTH WAY
CITY-ST-ZIP TALLAHASSEE FL

1.1 TITLE ☐ Change ☐ Addition

NAME DUGGAR, S.E.

STREET ADDRESS 2018 CHATSWORTH WAY

CITY-ST-ZIP TALLAHASSEE FL

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE STD ☐ DELETE

NAME DUGGAR, EVA
STREET ADDRESS 2018 CHATSWORTH WAY
CITY-ST-ZIP TALLAHASSEE FL

2.1 TITLE ☐ Change ☐ Addition

NAME DUGGAR, EVA

STREET ADDRESS 2018 CHATSWORTH WAY

CITY-ST-ZIP TALLAHASSEE FL

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE VP ☐ DELETE

NAME BAILEY, JOE
STREET ADDRESS 3853 WINDEMERE ROAD
CITY-ST-ZIP TALLAHASSEE FL

3.1 TITLE ☐ Change ☐ Addition

NAME BAILEY, JOE

STREET ADDRESS 3853 WINDEMERE ROAD

CITY-ST-ZIP TALLAHASSEE FL

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE VP ☐ DELETE

NAME BAILEY, GENNY
STREET ADDRESS 3853 WINDEMERE ROAD
CITY-ST-ZIP TALLAHASSEE FL

4.1 TITLE ☐ Change ☐ Addition

NAME BAILEY, GENNY

STREET ADDRESS 3853 WINDEMERE ROAD

CITY-ST-ZIP TALLAHASSEE FL

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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:

Eva Dugger STD

Date

1-9-99

Daytime Phone #

850 894-4443

CR2E034 (11/98)