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

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90196 036 ***150.00

DOCUMENT # 1. Corporation Name

HEGAL L	AND INVESTMENTS, INC.				
Principal Place of Business Mailing Address					##################################
% FRANK W. PAYTON 1326 S. RIDGEWOOD AVE. STE 15 DAYTONA BEACH FL 32114 **FRANK W. PAYTON 1326 S. RIDGEWOOD AVE. STE DAYTONA BEACH FL 32114 **DAYTONA BEACH FL 32114					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed
					08/02/1989
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-2963970 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_		5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & Stat	ity & State City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 25	Zip	Country		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes XNo
24	9. Name and Address of Current		<u>,,,,</u>		10. Name and Address of New Registered Agent
	5. Name and Address of Garten	. registeres rigeri	81	Name	1.17
PAY	TON, FRANK W.		<u> </u>		
1326 S. RIDGEWOOD AVE			82	Street	eet Address (P.O. Box Number is Not Acceptable)
SUITE 15			83		
DAYTONA BEACH FL 32114					
DAT	TOTA BEACTITE SETT		84	City	FL 85 Zip Code
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					
40	Signature, typed or printed name of registered agent OFFICERS ANI		13.	t signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	DP OF FIELD AND	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME			1.2 NAME		
	PAYTON, FRANK W.		1.3 STREET	ADDOFES	ree
STREET ADDRESS	1326 S. RIDGEWOOD AVE		1.4 CITY-S		
CITY-ST-ZIP	DAYTONA BEACH FL	☐ DELETE	2.1 TITLE	1+ZIF	☐ Change ☐ Addition
TITLE	DST THOMAS F		2.1 MAME		
NAME	PAYTON, THOMAS F.		2.3 STREET	ACCOUNTER	· ·
STREET ADDRESS	1326 S. RIDGEWOOD AVE				
CITY-ST-ZIP	DAYTONA BEACH FL	☐ DELETE	2.4 CITY-S 3.1 TITLE	1-219	☐ Change ☐ Addition
TITLE			3.7 TILE		
NAME				ADDDCCC	
STREET ADDRESS			3.3 STREET		C33
CITY-ST-ZIP		□ DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP	☐ Change ☐ Addition
TITLE		C DELETE	1		
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET		±330
CITY-ST-ZIP		□ DELETE	4.4 CITY-S	- ZIP	☐ Change ☐ Addition
TITLE			5.1 TITLE 5.2 NAME		
NAME			5.2 NAME 5.3 STREET	, VIDDE CO	ree l
STREET ADDRESS					200
CITY-ST-ZIP			5.4 CITY-S	- ZIP	J

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

F. Partin, V.P. Themes

904 2583761

Change

Addition