

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 06, 2004 8:00 am**  
**Secretary of State**

08-06-2004 90003 007 \*\*\*150.00

54067244



07302004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0212448 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DOCUMENT # L94003**

1. Entity Name  
**HAGEY HOUSE, INC.**



Principal Place of Business  
9920 59TH STREET NORTH  
PINELLAS PARK, FL 34666

Mailing Address  
9920 59TH STREET NORTH  
PINELLAS PARK, FL 34666

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
*15136 Dilbeck Drive*  
*Springhill Fla.*  
Suite, Apt. #, etc.  
City & State  
Zip Country  
*34610-2656*

6. Name and Address of Current Registered Agent  
**TICE, JAMES E.**  
**16220 SW 280 STREET**  
**HOMESTEAD, FL 33031**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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**  
**Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., if corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAGEY, LUCILLE 9920 59 ST N PINELLAS PARK, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PD</i> <i>Hagey, Lucille</i> <i>15136 Dilbeck Drive</i> <i>Springhill FLA. 34610-2656</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TICE, JAMES E 16220 SW 280TH ST HOMESTEAD, FL 33031 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ad
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHANTZ, EDWARD T 622 PERIMETER DR DOWNTOWN, PA, 19335 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ad
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PINTO, MAUREEN 15136 DILBECK DR SPRING HILL, FL 34610 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ad
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ad
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Ad

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 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, changed, or on an attachment with an address, with all other like empowered.

*Lucille Hagey*

Attachment  
54067244  
**JAMES E. TICE ASSOCIATES**

Accountants  
16220 S.W. 280th Street  
Homestead, Florida 33031

Telephone: (305) 247-3700  
Fax: Call First  
Cellular Phone: 305-322-5715

July 30, 2004

Division of Corporations  
P. O. Box 1500  
Tallahassee, Florida 32302 1500

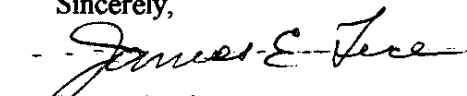
Gentlemen.

Re: Hagey House, Inc.  
L94003  
15136 Dilbeck Drive  
Springhill, Florida

Please be advised the above named client did not receive the original  
notification for filing the annual report. Please accept the enclosed check in the  
amount of \$150.00 and the enclosed annual report for the year 2004.

Thank you for this consideration.

Sincerely,

  
James E. Tice  
Accountant