


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000079231	
1. Entity Name BAGAN, INC.	

Principal Place of Business 13063 CLEARBROOK CT. JACKSONVILLE, FL 32224	Mailing Address 13063 CLEARBROOK CT. JACKSONVILLE, FL 32224
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01172004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3738573	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BAGAN, ELIZABETH G 13063 CLEARBROOK CT. JACKSONVILLE, FL 32224

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT BAGAN, ELIZABETH G 13063 CLEARBROOK CT. JACKSONVILLE, FL 32224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BAGAN, THOMAS A 13063 CLEARBROOK CT. JACKSONVILLE, FL 32224
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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

SIGNATURE: 	ELIZABETH G. BAGAN	1/15/04	904.992.7266
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #