## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000117941

Entity Name: HAGOOD & KELLY APPRAISAL SERVICES, P.A.

FILED Apr 27, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1510 NORTH PARK AVENUE 1020 HERMOSA AVENUE BARTOW, FL 33830 BARTOW, FL 33830

**Current Mailing Address: New Mailing Address:** 

1510 NORTH PARK AVENUE PO BOX 588

BARTOW, FL 33830 BARTOW, FL 33831-588

FEI Number: 90-0014378 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAGOOD, KAREN B HAGOOD, KAREN B 1510 NORTH PARK AVENUE 1020 HERMOSA AVENUE BARTOW, FL 33830 BARTOW, FL 33830

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.

SIGNATURE: 04/27/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition HAGOOD, KAREN B Name: Name: HAGOOD, KAREN B

1020 EAST HERMOSA AVENUE 1020 EAST HERMOSA AVENUE Address: Address:

BARTOW, FL 33830 City-St-Zip: BARTOW, FL 33830 City-St-Zip:

( ) Delete Title: VSD Title: (X) Change ( ) Addition HAGOOD, HUBERT D Name: HAGOOD, HUBERT D

Name:

1020 EAST HERMOSA AVENUE 1020 EAST HERMOSA AVENUE Address: Address:

BARTOW, FL 33830 BARTOW, FL 33830 City-St-Zip: City-St-Zip:

Title: Title: () Delete **VPS** ( ) Change (X) Addition

Name: KELLY, KIMBERLY L Name: 1035 TRASK LANE Address: Address: City-St-Zip: City-St-Zip: BARTOW, FL 33830

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN B. HAGOOD **PRS** 04/27/2005