

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167972

Entity Name: HAIG, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

4027 W OAKRIDGE ROAD
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

4027 W OAKRIDGE ROAD
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 20-0021497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBLANC, JEAN W
4027 W OAKRIDGE ROAD
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEBLANC, JEAN
Address: 7006 VICARAGE COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: DELICE, PATRICK
Address: 6724 TOTTENHAM COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: ETIENNE, JACQUELINE
Address: 605 MOSS PARK COURT
City-St-Zip: KISSIMMEE, FL 34743

Title: D () Delete
Name: JOSEPH, W GUY
Address: 7301 CROOKED LAKE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: ELMEUS, JEAN L
Address: 4027 W OAKRIDGE ROAD
City-St-Zip: ORLANDO, FL 32809

Title: D (X) Delete
Name: NAU, E. LIONEL DR.
Address: 9101 DOWN CREST WAY
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEAN LEBLANC

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date