

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000167972

1. Entity Name
HAIG, INC.



Principal Place of Business
4027 W OAKRIDGE ROAD
ORLANDO, FL 32809

Mailing Address
4027 W OAKRIDGE ROAD
ORLANDO, FL 32809



04082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0021497

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
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 _____

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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000893206
04/23/08-80098-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LEBLANC, JEAN
STREET ADDRESS	7006 VICARAGE COURT
CITY-ST-ZIP	ORLANDO, FL 32818
TITLE	D
NAME	DELICE, PATRICK
STREET ADDRESS	6724 TOTTENHAM COURT
CITY-ST-ZIP	ORLANDO, FL 32818
TITLE	D
NAME	ETIENNE, JACQUELINE
STREET ADDRESS	605 MOSS PARK COURT
CITY-ST-ZIP	KISSIMMEE, FL 34743
TITLE	D
NAME	JOSEPH, WILSON G
STREET ADDRESS	1886 MARSH WREN CT
CITY-ST-ZIP	OCOE, FL 34761
TITLE	D
NAME	ELMEUS, JEAN L
STREET ADDRESS	4027 W OAKRIDGE ROAD
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-08-08

Date

Daytime Phone #