

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # P92000002136 1. Corporation Name HAGAN MOTORS, INC.							
Principal Place of Business 6555 103rd St. Jacksonville, FL 32210			Mailing Address 927 Arthur Moore Dr. Green Cove Springs, FL 32043				
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 11/02/1992 4. FEI Number 59-3150095 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent JOHN F. TOLSON, JR. 2301 PARK AVE., SUITE #406 ORANGE PARK, FL 32073			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE _____ (NOTE: Registered Agent signature required when installing)							
12. OFFICERS AND DIRECTORS 12.1 TITLE P 12.2 NAME HAGAN, CLEO W. ☐ DELETE 12.3 STREET ADDRESS 927 ARTHUR MOORE DR. 12.4 CITY-STATE-ZIP GREEN COVE SPRINGS, FL 32043 12.5 TITLE VP 12.6 NAME BURNS, VICKIE ☐ DELETE 12.7 STREET ADDRESS 927 ARTHUR MOORE DR. 12.8 CITY-STATE-ZIP GREEN COVE SPRINGS, FL 32043 12.9 TITLE ST 12.10 NAME BURNS, MICHAEL A. ☐ DELETE 12.11 STREET ADDRESS 927 ARTHUR MOORE DR. 12.12 CITY-STATE-ZIP GREEN COVE SPRINGS, FL 32043 12.13 TITLE ☐ DELETE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-STATE-ZIP 12.17 TITLE ☐ DELETE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY-STATE-ZIP 12.21 TITLE ☐ DELETE 12.22 NAME 12.23 STREET ADDRESS 12.24 CITY-STATE-ZIP						13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-STATE-ZIP 13.5 TITLE ☐ Change ☐ Addition 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-STATE-ZIP 13.9 TITLE ☐ Change ☐ Addition 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-STATE-ZIP 13.13 TITLE ☐ Change ☐ Addition 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-STATE-ZIP 13.17 TITLE ☐ Change ☐ Addition 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-STATE-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Cleo W. Hagan Pres 2-3-98 (904)

CR2E034 (10/97)