

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90018 002 ***150.00

DOCUMENT # P94000076721

1. Corporation Name
JAMES G. HART, INC.

Principal Place of Business
5241 WESTSHORE DRIVE
NEW PORT RICHEY FL 34652

Mailing Address
5241 WESTSHORE DRIVE
NEW PORT RICHEY FL 34652

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/19/1994

4. FEI Number
59-3281325

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business
21 1141 Lionsgate Ln
Suite, Apt. #, etc.

2a. Mailing Address
26 1141 Lionsgate Ln
Suite, Apt. #, etc.

23 City & State
Gulf Breeze Fl.

28 City & State
Gulf Breeze Fl.

24 Zip
32561

29 Zip
32561

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HART, JAMES G
5241 WESTSHORE DR.
NEW PORT RICHEY FL 34652

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 1141 Lionsgate Ln

84 City
Gulf Breeze

FL

85 Zip Code
32561

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 James G. Hart, Pres.

(NOTE: Registered Agent signature required when reinstating)

DATE 1-22-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME HART, JAMES G
STREET ADDRESS 5241 WESTSHORE DR.
CITY-ST-ZIP NEW PORT RICHEY FL 34652

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ST
NAME HART, MARTHA M
STREET ADDRESS 5241 WESTSHORE DR.
CITY-ST-ZIP NEW PORT RICHEY FL 34652

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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, with all other like empowered.

SIGNATURE: Martha M. Hart, Sec/Treas 1-22-99 850 9344259

CR2E034 (11/98)