2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Jun 01, 2004 8:00 am
Secretary of State
05-06-2004 90175 049 ***100.00
06-01-2004 90005 038 ****50.00

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1. Entity Name
APPLEGATE ENTERPRISES INC.

Principal Place of Business	Mailing Address
2612 HUNTINGTON AVENUE SARASOTA, FL 34232	2612 HUNTINGTON AVENUE SARASOTA, FL 34232

DO NOT WRITE IN THIS SPACE

04292004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0574505

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

APPLEGATE, ROBERT E
2612 HUNTINGTON AVENUE
SARASOTA, FL 34232

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

~~USC00154378~~ A.H
~~05/04/04-80154-021 150.00~~

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	APPLEGATE, ROBERT E
STREET ADDRESS	2612 HUNTINGTON AVENUE
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	S
NAME	CORY, JACQUELINE M
STREET ADDRESS	2612 HUNTINGTON AVENUE
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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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 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 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: _____ April 29, 2004 941-924-6020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #