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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000048999 (3)
1. Corporation Name

CHARLES W. HAGGARD, JR., INC.

## FILED Mar 11 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				
8688 WOODBRIAR DR. 8688 WOODBRIAR DR. SARASOTA FL 34238 SARASOTA FL 34238				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				06/20/1995
	lace of Businoss	2a. Mailing Address	of the Alt	4. FEI Number Applied For
21 <b>788</b> Suite, Apt.	Blud of the ARD	26 988 Blud Suite, Apt. #, etc.	OF THE TAKE	60 7E 4 1411
22 AP	in the same		15	6. Certificate of Status Desired Fee Required
City & State	6	City & State	)	6. Election Campaign Financing \$5.00 May Be
23 SARAS	otra 17h	28 SARASOYA	F L,	Trust Fund Contribution Added to Fees
Zip 24 3リムろ	6 25 SARASO 104	29 34236 3	Country  SPLASO YA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No
24 3423	9, Name and Address of Current	<del></del>	0 2/7-1830 / P4	10. Name and Address of New Registered Agent
HADDADD CHADITO WID				
11				ress (P.O. Box Number is Npt Acceptable)
SARASOTA FL 34238			of Blud of the ARTS	
			63 P	or 115
			84 City	85 Zip Code -
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-pamed 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.				
CHARLES CHARLES IN HA GGARD TV. Kall INTERES 2 2				
Signature, typed or printed name of registered and title II applicable (NOR. Augistered Agent signature requisit within reinstating) OATE				
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	HAGGARD, CHARLES W JR.	E Dicere	1.2 NAME	MAGGARD Charles W TY
STREET ADDRESS	8688 WOODBRIAR DR.		1.3 STREET ADDRESS	GO BLUE OF THE ARTS 4 115
CITY-ST-ZIP	SARASOTA FL 34238		1.4 CITY-ST-ZIP	5424504A. FL. 3423 Y
TITLE		DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Change
TITLE NAME		Dittit.	3.2 NAME	Cital Sec 2 Addition
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CiTY-ST-ZiP	
TITLE		DELETE	41 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
City-St-ZIP	· <del></del>	T perese	4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	· _
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6 4 CITY - ST - ZIP	
14. I hereby c	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

16. I nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 Changert, or ori an attachment with an address.

SIGNATURE: FRANCE NO THE DI NAME OF SIGNATO OFFICER OR OFFICE

3/24/9( 941-362.2017