

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000049756 (6)

1. Corporation Name  
FLAGULL, INC.

Principal Place of Business  
3540 HOGAN DRIVE  
NEW PORT RICHEY FL 34655

Mailing Address  
3540 HOGAN DRIVE  
NEW PORT RICHEY FL 34655-2003



3. Date Incorporated or Qualified  
06/23/1995

3a. Date of Last Report  
12/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

NOT APPLICABLE

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

COLVIN, JIM  
4340 SEAGULL DR.  
NEW PORT RICHEY FL 34652

10. Name and Address of New Registered Agent

81 Name  
Colvin, Jim  
82 Street Address (P.O. Box Number is Not Acceptable)  
3540 HOGAN DR.

83  
84 City  
New Port Richey FL 85 Zip Code  
34655

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

Jim Colvin Jim Colvin Pres.

2-11-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	COLVIN, JIM	3540 HOGAN DR.	NEW PORT RICHEY FL 34655	<input type="checkbox"/>
VP	CHENAULT, MARY	3540 HOGAN DR.	NEW PORT RICHEY FL 34655	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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: Jim Colvin Jim Colvin

2-11-97 (813) 849-2266

Date

Daytime Phone

CR2E034 (9/96)