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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000090428 (0)

1. Corporation Name

FATHER & DAUGHTER ENTERPRISES, INC.



Principal Place of Business

1940 DREW STREET  
CLEARWATER FL 34625

Mailing Address

1940 DREW STREET  
CLEARWATER FL 34625

3. Date Incorporated or Qualified

11/28/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

HOAGLIN, EARL M  
1940 DREW STREET  
CLEARWATER FL 34625

4. FEI Number

59-003350988

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

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 607.1503, 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

Signature typed or printed below for current agent and Director

Signature typed or printed below for new agent and Director

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P/D

Elizabeth L. Hoaglin

1.2 NAME

1940 Drew St

1.3 STREET ADDRESS

Clearwater FL 34625

1.4 CITY- ST- ZIP

2.1 TITLE

V/D

2.2 NAME

Jack W. Kirschmann

2.3 STREET ADDRESS

1940 Drew St

2.4 CITY- ST- ZIP

Clearwater FL 34625

3.1 TITLE

S/D

3.2 NAME

Henry Stone

3.3 STREET ADDRESS

1940 Drew St

3.4 CITY- ST- ZIP

Clearwater FL 34625

4.1 TITLE

T/D

4.2 NAME

April Lin Stone

4.3 STREET ADDRESS

1940 Drew St

4.4 CITY- ST- ZIP

Clearwater FL 34625

5.1 TITLE

D

5.2 NAME

Earl M. Hoaglin

5.3 STREET ADDRESS

1940 Drew St

5.4 CITY- ST- ZIP

Clearwater FL 34625

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X Earl M Hoaglin  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/96 445 9543  
Date Daytime Phone #

CR2E034 (12/95)