

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

APPROVED
AND
FILED

1999 AUG 31 PM 4: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000097728					
1. Corporation Name SGH, INC.					
Principal Place of Business 4038 LAFAYETTE STREET MARIANNA FL 32446			Mailing Address P.O. BOX 1135 MARIANNA FL 32446 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/21/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 58-9352367	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☒ - \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	7. This corporation owes the current year intangible Personal Property Tax. ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent HUTTON, STEPHEN G 4038 LAFAYETTE STREET MARIANNA FL 32446				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				85	Zip Code
11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when withdrawing)					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	PVST	POST OFFICE BOX 1135 N/A	MARIANNA FL 32446	1.1 TITLE ☐ Change ☐ Addition	
	HUTTON, STEPHEN G			1.2 NAME	
				1.3 STREET ADDRESS	
				1.4 CITY-ST-ZIP	
				2.1 TITLE ☐ Change ☐ Addition	
				2.2 NAME	
				2.3 STREET ADDRESS	
				2.4 CITY-ST-ZIP	
				3.1 TITLE ☐ Change ☐ Addition	
				3.2 NAME	
				3.3 STREET ADDRESS	
				3.4 CITY-ST-ZIP	
				4.1 TITLE ☐ Change ☐ Addition	
				4.2 NAME	
				4.3 STREET ADDRESS	
				4.4 CITY-ST-ZIP	
				5.1 TITLE ☐ Change ☐ Addition	
				5.2 NAME	
				5.3 STREET ADDRESS	
				5.4 CITY-ST-ZIP	
				6.1 TITLE ☐ Change ☐ Addition	
				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: STEPHEN G HUTTON 11/4/99 850 526-4428