

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

FILED

Mar 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000063374 (8)

1. Corporation Name  
J.P. BAGGS, INC.

Principal Place of Business  
7418 SOUTH TAMIAH TRAIL  
SARASOTA FL 34231  
US

Mailing Address  
SAME  
NAPLES FL 34112  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/30/1996	
21		26		4. FEI Number 65-0706318	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip	25	Country	29	Zip
24		25		29	

9. Name and Address of Current Registered Agent BAGGIANO, JOSEPH R 817 SORRENTO PLACE NOKOMIS FL 34275		10. Name and Address of New Registered Agent	
		81 Name	DAN CREWETT
		82 Street Address (P.O. Box Number is Not Acceptable)	5777 BENEVA RD
		83	
		84 City	Sarasota
		85 FL	34233

11. Pursuant to the provisions of Sections 607.0302 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 607.0506, Florida Statutes.

SIGNATURE: *[Signature]* DAN CREWETT DATE: 3/12/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	Pres, D. Parker <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAGGIANO, JOSEPH R	1.2 NAME	
STREET ADDRESS	817 SORRENTO PLACE	1.3 STREET ADDRESS	6484 COLLINGSWOOD CIRCLE
CITY-ST-ZIP	NOKOMIS FL	1.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	<i>[Signature]</i> <input type="checkbox"/> DELETE	2.1 TITLE	Sec/Treas <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Patricia BAGGIANO
STREET ADDRESS		2.3 STREET ADDRESS	6484 COLLINGSWOOD CIRCLE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: *[Signature]* Patricia Baggiano

3/12/98

CR25034 (10/97)