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FILED  
May 05 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000087041 (5)

1. Corporation Name

FLANAGAN'S OF CLEARWATER, INC.



Principal Place of Business

2569 COUNTRYSIDE BLVD  
STE 17  
CLEARWATER FL 34621  
US

Mailing Address

1918 ALTON DR  
CLEARWATER FL 34623  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/22/1996

4. FEI Number

59-3406674

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2569 COUNTRYSIDE BLVD  
Suite, Apt. #, etc.

22 City & State

27 17  
City & State

23 Zip

Country

28 CLEARWATER  
Zip

Country

24

25

29 FL

30 33761

9. Name and Address of Current Registered Agent

FLANAGAN, MARGARET  
1918 ALTON DR  
CLEARWATER FL 34623

10. Name and Address of New Registered Agent

81 Name

FLANAGAN, MARGARET

82 Street Address (P.O. Box Number is Not Acceptable)

2569 COUNTRYSIDE BLVD # 17

83

84 City

CLEARWATER

FL

85 Zip Code

33761

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 MARGARET

FLANAGAN

4/27/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME FLANAGAN, PATRICK M  
STREET ADDRESS 1918 ALTON DR  
CITY-ST-ZIP CLEARWATER FL

TITLE VSTD ☐ DELETE

NAME FLANAGAN, MARGARET E  
STREET ADDRESS 1918 ALTON DR  
CITY-ST-ZIP CLEARWATER FL

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 ☒ Change ☐ Addition

12 NAME FLANAGAN PATRICK M  
1.3 STREET ADDRESS 2569 COUNTRYSIDE BLVD # 17  
1.4 CITY-ST-ZIP CLEARWATER FL 33761

2.1 TITLE VSTD ☐ Change ☐ Addition

22 NAME FLANAGAN MARGARET E  
2.3 STREET ADDRESS 2569 COUNTRYSIDE BLVD # 17  
2.4 CITY-ST-ZIP CLEARWATER FL 33761

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.

SIGNATURE:

M E Flanagan

4/27/98

CR2E034 (10/97)