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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101254 (6)

HOGAN'S SNOWBALL SHACK INC.

Mailing Address

FILED Sep 16 1997 8:00am Secretary of State



805 DONALD ROSS ROAD SUITE A-2 JUNO BEACH FL 33408				05 donald ro Iuno Beach Fl						
								3. Date Incorporated or Qualified 3a. Date of Last Report 12/13/1996		
2. Principal P	lace of Busine	ss	2	a. Mailing Add	ress			4. FEI Number Applied For		
21				26				V 65-0' /44 295 Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired See Required		
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	2		29		3	Country	<i>'</i>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	·· ····	nd Address of C	urrent Reg	istered Agent				10. Name and Address of New Registered Agent		
	an, Willian					81	Nam	ame		
1801 S US 1 #15C " JUPITER FL 33477						82		treet Address (P.O. Box Number is Not Acceptable)		
•						83				
						84	City	ity FL 85 Zip Code		
office or re	egistered age	ns of Sections 60 nt, or both, in the r, and accept the	State of Flo	orida. Such chai	nge was au	thorized b	zithe o	amed corporation submits this statement for the purpose of changing its registered a corporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Classitus I	proted name of registr		ata di analiankia	ALONE.	The sistence of the				
12.	Signature, typed o	WEREAU TOTAL AND THE STATE	S AND DIR		(NOTE:	13.	oni signa	gnature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE			· · · · · · · · · · · · · · · · · · ·	□ 0	ELETE	1.1 TOLE	• • • •	President Change Addition		
NAME						1.2 NAME		William J. Hagan 805 Donald Ross Pd		
STREET ADDRESS					1.3 STREET ADDRESS		ress 805 Donald Ross Pd			
CITY-ST-ZIP						1.4 CITY-5	T-ZIP			
TITLE	☐ DELETÉ 2.11				ELETE	2.1 TITLE		Vice President Change Addition		
NAME						2.2 NAME		PESS DONALD ROSS Rd		
STREET ADDRESS						2.3 STREET		June Good Fl. Barbon		
CITY-ST-ZIP					ELETE	2. 4 CITY -	ST-ZIP			
TITLE NAME				L.J 0	LLETE	3.1 TITLE 3.2 NAME		Change L. Addition		
STREET ADDRESS						3.3 STREET	ANODEC	proc		
CITY-ST-ZIP						3.4. CITY-				
TITLE				D	ELFTE	4.1 TITLE	J. L.	Change Addition		
NAME						4. 2 NAME				
STREET ADDRESS						4.3 STREET	ADDRES	RESS		
CITY - ST - ZIP				· —		4.4 C/TY- S	Ť-ZIP			
TITLE				□ o	ELETE	5.1 TITLE		Change A Arighton		
NAME						5.2 NAME		Krich.		
STREET ADDRESS						5.3 STREET		~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
CITY-ST-ZIP				П.	C C C	5.4 CHY-5	T-ZIP			
TITLE				ן ו	ELETE	6.1 TITLE		Change Addition		
NAME						6.2 NAME	******	700002298727 -09/22/9701002014		
STREET ADDRESS						6.3 STREET		""" ቋቋቋሮሮስ በብ		
ÇITY-ST-ZIP						64 CITY-S	i - ZIP	·		

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 eath; 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: Addition

William T Llogge

47007

(E) 1771 0055