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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P97000021197 (3)

EARLY DUGGAR'S WHARF, INC.

## **FILED** Apr 29 1998 8:00am Secretary of State



		·	— I TO DROUD HIP INTER INTER DEPART OPAR HADAI DEPART	HE
Principal Place of Business	Mailing Address			1001 1(001 (1010 1011(1001 1001
4141 APALACHEE PARKWAY	4141 APALACHEE PARKWA	AY		
TALLAHASSEE FL 32311	TALLAHASSEE FL 32311		DO NOT WRITE IN THIS SPACE	
<u>-</u>			3. Date Incorporated or Qualified	JOI AOL
			03/07/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3454166	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	· <del></del>		\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zıp	Country	8. This corporation owes or has paid the c	· <del></del>
24 25	29 3	60	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	1 Agent
SMITH, J. LAYNE		81 Name		
1330 THOMASVILLE ROAD		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32308		Silber Addi	less (F.O. DOX Number is Not Acceptable)	
· · · · · · · · · · · · · · · · · · ·		83		
		54 0		law Zin Ondi
		84 City	Fi	85 Zip Code
11. Pursuant to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the nurpose	of changing its registered
office or registered agent, or both, in the State agent. Lam familiar with, and accept the oblid	e of Florida. Such change was aut actions of Section 607.0505. Florid	thorized by the corporat da Statules.	lion's board of directors. I hereby accept the ap	pointment as registered
•				
SIGNATURE Signature, typed or printed name of registered ag	on and title if applicable (NOTE: I	Registored Agent signature requir	red when reinstating) DATE	
	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
THE Secretary/Tre	QSUITET DELETÉ	1 1 TITLE		☐ Change ☐ Addition
NAME Genny Bailed STREET ADDRESS 3853 Winder	1	1.2 NAME		
STREET ADDRESS 3853 Winder	nere ka	1.3 STREET ADDRESS		
city-st-zip Tallahassee, Fz	323//	1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CHTY - ST - ZIP		
TITLE	DELETE	3.1 THTLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	L_] DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
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 v	vith this filing does not qualify for tall annual report is true and accur	the exemption stated in ate and that my signatu	Section 119.07(3)(i), Florida Statutes. I further or shall have the same legal effect as if made to	certify that the information index path that I am an

officer or director of the corporation or trustee and accurate and that my signature shall have the same legal effect as if made under oath; that I am a 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 on an attachment with an address.