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Jan 26 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 # P97000039065 (2)

1. Corporation Name
NETDATA, INC.



Principal Place of Business Mailing Address
8411 DOUG CORRIGAN LANE 8411 DOUG CORRIGAN LANE
CRYSTAL RIVER FL 34429-9006 CRYSTAL RIVER FL 34429-9006

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/26/1997

4. FEI Number

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 7832 Solar PL

26 7832 solar PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Homosassa, FL

28 Homosassa, FL

Zip

Zip

Country

Country

24 34448

25 U.S.A.

29 34448

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GAGLE, EDGAR A
8411 DOUG CORRIGAN LANE
CRYSTAL RIVER FL 34429-9006

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/12/98

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE
NAME GAGLE, EDGAR A
STREET ADDRESS 8411 DOUG CORRIGAN LN
CITY-ST-ZIP CRYSTAL RIVER FL 34429

TITLE VD ☐ DELETE
NAME GAGLE, FREDERICK J
STREET ADDRESS 8411 DOUG CORRIGAN LN
CITY-ST-ZIP CRYSTAL RIVER FL 34429

TITLE S ☐ DELETE
NAME GAGLE, JEAN B
STREET ADDRESS 8411 DOUG CORRIGAN LANE
CITY-ST-ZIP CRYSTAL RIVER FL 34429-9006

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 ☐ Change ☐ Addition
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)(f), 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:

Edgar Allen Gagle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-98

Date

Daytime Phone #

0464253

CR2E034 (10/97)