

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90091 023 ***150.00

DOCUMENT # P97000089791

1. Entity Name
FAGAN FOUR, INC.

Principal Place of Business

1857 WELLS RD

~~STE 232~~

ORANGE PARK FL 32237

US

Mailing Address

1857 WELLS RD

~~STE 232~~

ORANGE PARK FL 32237

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

SUITE 6

Suite, Apt. #, etc.

SUITE 6

City & State

City & State

Zip

32073

Country

Zip

32073

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3016155**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FAGAN, RICHARD R

3408 NORTH FAIRBANKS GRANT ROAD

JACKSONVILLE FL 32223

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

P
FAGAN, LYNNE L.
301 RIO PINAR TRAIL
ORMOND BEACH FL 32174

☒ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

ST
FAGAN, RICHARD R.
3408 FAIRBANKS GRANT RD
JACKSONVILLE FL 32223

☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

T
FAGAN, JANTONETTA
4408 PEPPER MILL PL
JACKSONVILLE FL 32257

☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

PRESIDENT

☒ Change ☐ Addition

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard R. Fagan
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-21-02

Date

(904) 215-8520

Daytime Phone #

CR2E034 (9/01)