

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000032191

FILED  
Feb 10, 2002 8:00 AM  
Secretary of State

**Entity Name:** MCH SQUARED ENTERPRISES, INC.

**Current Principal Place of Business:**

1034 FLEMING DRIVE  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

1034 FLEMING DRIVE  
PENSACOLA, FL 32514

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAGLER, LEE C III  
1034 FLEMING DRIVE  
PENSACOLA, FL 32514 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HAGLER, LEE C III  
Address: 1034 FLEMING DRIVE  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: HILL, JAMES E JR  
Address: 5686 N. BLUE ANGEL PARKWAY  
City-St-Zip: PENSACOLA, FL 32526

Title: D ( ) Delete  
Name: MCGONAGIL, JAMES C  
Address: 4217 DE LEN DRIVE  
City-St-Zip: PANAMA CITY, FL 32404

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAGLER,LEE,C,III

D

02/10/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date