

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

FILED

Jan 10, 2007 08:00 AM  
Secretary of State

DOCUMENT# P99000057735

1. Entity Name  
BUGGYBAGG, INC.



Principal Place of Business  
248 SW WEBBS GLEN  
LAKE CITY, FL 32024

Mailing Address  
248 SW WEBBS GLEN  
LAKE CITY, FL 32024



01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
59-3636881

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROGERS, MICHAEL JR.  
876 SW BUCKLEY LANE  
LAKE CITY, FL 32024

DO NOT WRITE  
IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME ROGERS, SHIRLEY W  
STREET ADDRESS 1203 SW COUNTY RD 349  
CITY-ST-ZIP LAKE CITY, FL 32024

TITLE VP  
NAME COLE, SHARLA M  
STREET ADDRESS 10014 SIFTON CT.  
CITY-ST-ZIP JACKSONVILLE, FL 32246

TITLE T  
NAME ROGERS, MICHAEL JR.  
STREET ADDRESS 876 SW BUCKLEY LANE  
CITY-ST-ZIP LAKE CITY, FL 32024

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000580805  
01/10/07-80062-016 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Michael C Rogers Jr.*  
Michael C Rogers Jr. (Treasurer)

01-05-07

386-758-5836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #