

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Gordon B. Adams
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 21 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V00300

(6)

1. Corporation Name

SAGO INVESTMENTS, INC.

Principal Place of Business

5728 MAJOR BLVD
SUITE 300
ORLANDO FL 32819
US

Mailing Address

13501 LAKE LUNTZ DRIVE
WINTER GARDEN FL 34787

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/16/1991

3a. Date of Last Report

04/28/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3102901

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☒ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TARR, SCOTT
13501 LAKE LUNTZ DRIVE
WINTER GARDEN FL 34787

61 Name

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

63

64 City

FL

65 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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PSD

NAME

TARR, SCOTT R

STREET ADDRESS

13501 LAKE LUNTZ DR

CITY-ST-ZIP

WINTER GARDEN FL

1.1 TITLE

President / Director

☒ Change

☐ Addition

1.2 NAME

Scott R. Tarr

1.3 STREET ADDRESS

13501 LAKE LUNTZ Drive

1.4 CITY-ST-ZIP

Winter Garden, FL 34787

TITLE

VTD

NAME

TARR, SUZANNE M

STREET ADDRESS

13501 LAKE LUNTZ DR

CITY-ST-ZIP

WINTER GARDEN FL

2.1 TITLE

Secretary / Director

☒ Change

☐ Addition

2.2 NAME

TARR, SUZANNE M

2.3 STREET ADDRESS

13501 LAKE LUNTZ DR

2.4 CITY-ST-ZIP

Winter Garden, FL 34787

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

Vice President / Director

☐ Change

☒ Addition

3.2 NAME

Roche, Robert

3.3 STREET ADDRESS

2808 Tropic Court

3.4 CITY-ST-ZIP

Winter Garden, FL 34787

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

Treasurer / Director

☐ Change

☒ Addition

4.2 NAME

Roche, Linda

4.3 STREET ADDRESS

2808 Tropic Court

4.4 CITY-ST-ZIP

Winter Garden, FL 34787

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott TARR

4/17/95 (401)363.3920