## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # V33012

(8)

EUGENE HANGLEY ENTERPRISES, INC.

Principal Place of Business	Mailing Address	) to bet girebi
3153 LAKE PINE WAY E-2 TARPON SPRINGS FL 34689	3153 LAKE PINE WAY E-2 TARPON SPRINGS FL 34689	
		3. Date incorp 04/29/19
2. Principal Place of Business	2a. Mailing Address	4. FEI Numbe
21	26	59-3122

**FILED** May 13 1997 8:00am Secretary of State



- Frincipa: Fra	ace of Business	Mailing Address					AND MININGS		A1611 1881	
3153 LAKE PINE WAY E-2 3153 LAKE PINE WAY E-2 TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689										
						3. Date incorporated or Qualified 04/29/1992	1	e of Last F <b>8/1996</b>	Report	
<del></del>	Place of Business	2a. Mailing Addres	SS			4. FEI Number		A	pplied For	
21		[26]			<del></del>	59-3122820			ot Applicable	
27		27				5. Certificate of Status Desired			\$8.75 Additional Fee Required	
		<del> </del>	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip	Country	Zip	<del></del> 1	ountry	'	8. This corporation has liability for in	tangible t	ax under s	s. 199.032,	
24	25   9. Name and Address of Curre	29 ant Registered Acont	30			Florida Statutes  10. Name and Address of New Reg		No		
		ant negistered Agent		81	Name	10, Name and Address of New Neg	ISTOTOU M	Agin	***************************************	
	INGLEY, EUGUNE								····	
	53 LAKE PINE WAY E-2 RPON SPRINGS FL 34689			82	Street Addi	ress (P.O. Box Number is Not Acceptabl	e)			
in	PLOM SEMMOS EF 24009			<b>B3</b>		The state of the s	····	·····		
				84	City		FL	<b>85</b> Zip	Code	
11 Parenar	at to the provisions of Sections 607.05	502 and 607 1508. Florida	a Statutes the	abovi	a-named corr	poration submits this statement for the pu		changing	its registered	
office of agent. f		te of Florida. Such chang igations of, Section 607.0	je was authoriz 1505, Florida St	zed by tatute:	the corporal s.	tion's board of directors. I hereby accep-	the appo	ointment as	s registered	
	Stignature, typed or printed name of registered a				ent signature requir	red when reinstating)	DATE	DIDECTO	00 111 10	
<b>12.</b> TILE	OFFICERS A	ND DIRECTORS	18 FTF 13	TITLE	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICE		Change	Addition	
NAME	HANGLEY, EUGENE	ott	1	NAME			•		Taganor	
STREET ADORESS	ALCA LAUR BILLE WILL W				ADDRESS					
CHY-ST-ZIP	TARPON SPRINGS FL			CITY						
THE		☐ DEL								
NAME				TIFLE	l l			Change	Additio	
			2.2	NAME				Change	Addition	
STREET ADDRESS	5			NAME	ADDRESS			Change	☐ Addition	
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CITY - \$1 - ZIP 10 LE	5	☐ DEU	2.3 2.4 ETE 3.1	NAME STREET CITY- TITLE	Ţ			Change Change	Addition	
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CITY - S1 - ZIP THLE NAME STREET ACORES!		☐ D€U	2.3 2.4 ETE 3.1 3.2 3.3	NAME STREET CITY- TITLE NAME STREET	ST-ZIP  ADDRESS			- "		
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CITY - ST- ZIP THLE NAME STHEET ACCRESS COTY - ST- ZIP THLE		☐ DEU	2.3 2.4 ETE 3.1 3.2 3.3 3.4 ETE 4.1	NAME STREET CITY- TITLE NAME STREET CITY- TITLE	ST-ZIP  ADDRESS			- "		
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I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), 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:

Daytime Phone #