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Feb 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V53756 (5)

1. Corporation Name
LADSGAR, INC.

Principal Place of Business

~~12700 HOMOSASSA RIVER~~
~~HOMOSASSA FL 34448~~

Mailing Address

~~P.O. BOX 840~~
~~HOMOSASSA FL 34487-0840~~

2. Principal Place of Business

21 1000 Haver

Suite, Apt. #, etc.

22 

City & State

23 WINTER HAVEN FL.

Zip

24 33883

Country

25 USA

2a. Mailing Address

26 119 14TH ST. SE.

Suite, Apt. #, etc.

27 

City & State

28 WINTER HAVEN FL.

Zip

29 33883-1906

Country

30 USA

3. Date Incorporated or Qualified

07/28/1992

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3135030

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

RAGSDALE, DAN W.

~~12700 HOMOSASSA RIVER~~
~~HOMOSASSA FL 34448~~

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 title, if any, cable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

P
RAGSDALE, DAN W.
~~P.O. BOX 840 N/A~~
~~HOMOSASSA FL~~

TITLE NAME ☐ DELETE

VS.7.
RAGSDALE, DAN W.
~~P.O. BOX 840 N/A~~
~~HOMOSASSA FL~~

TITLE NAME ☐ DELETE

D
BEALE, CHARLES ROBERT (BOB)
~~P.O. BOX 840 N/A~~
~~HOMOSASSA FL 34487-0840~~

TITLE NAME ☐ DELETE

P
RAGSDALE, ROSIE E. L.
119 14TH ST. S.E.
WINTER HAVEN FL 33883-1906

TITLE NAME ☐ DELETE

TITLE NAME ☐ DELETE

TITLE NAME ☐ DELETE

TITLE NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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.

CR2E034 (9/96)