

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 12, 2008 08:00 AM
Secretary of State

DOCUMENT # 692711 1. Entity Name FREDERICK R. MACLEAN, P.A.	
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Principal Place of Business 2600 N.E. 14 ST. CAUSEWAY POMPAÑO BEACH, FL 33062	Mailing Address 2600 N.E. 14 ST. CAUSEWAY POMPAÑO BEACH, FL 33062
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01212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2135386	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACLEAN, ANNE B.
2600 N.E. 14 STREET CAUSEWAY
POMPAÑO BEACH, FL 33062

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.

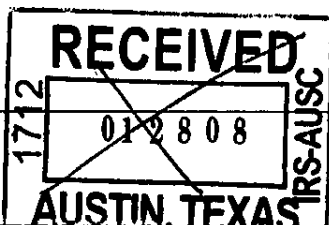
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	DATE 02/21/08-80008-009 150.00
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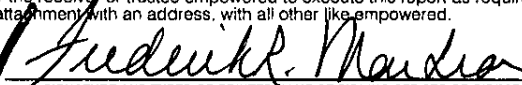
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MACLEAN, FREDERICK R. 2600 N.E. 14 ST. CSWY POMPAÑO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MACLEAN, ANNE B. 2600 N.E. 14 ST. CSWY. POMPAÑO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EMA, CHRISTOPHER 260 NE 14 ST. CSWY. POMPAÑO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE



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  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Frederick R. MacLean, President	1/21/2008 Date	954-785-1900 Daytime Phone #
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