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.

Principal Place of Business	Mailing Address
2600 N.E. 14 ST. CAUSEWAY POMPANO BEACH, FL 33062	2600 N.E. 14 ST. CAUSEWAY POMPANO BEACH, FL 33062

01212008 No Chg-P CR2E034 (11/05)

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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
POMPANO BEACH, FL 33062

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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 _____ DATE
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

000000825392
02/21/08-80008-009 150.00

10. OFFICERS AND DIRECTORS

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

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1712 012808 IRS-AUSC
AUSTIN, TEXAS

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