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**Jan 25, 1999 8:00am**  
**Secretary of State**

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **G91782**

1. Corporation Name  
**MECHANICAL CONTROLS CORPORATION**



DO NOT WRITE IN THIS SPACE

Principal Place of Business      Mailing Address  
 % HARRY G. ASTON      % HARRY G. ASTON  
 3350 ULMERTON RD UNIT 24      3350 ULMERTON RD UNIT 24  
 CLEARWATER FL 33762      CLEARWATER FL 33762

3. Date Incorporated or Qualified  
**03/19/1984**

4. FEI Number      Applied For  
**59-2386240**      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 owes the current year Intangible Personal Property Tax.       Yes       No

2. Principal Place of Business      2a. Mailing Address

21      26

Suite, Apt. #, etc.      Suite, Apt. #, etc.

22      27

City & State      City & State

23      28

Zip      Country      Zip      Country

24      25      29      30

9. Name and Address of Current Registered Agent

**ASTON, HARRY G.**  
**3350 ULMERTON ROAD**  
**SUITE 14**  
**CLEARWATER FL 34622**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City      85 Zip Code  
**FL**

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 applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

12. OFFICERS AND DIRECTORS

TITLE      NAME      STREET ADDRESS      CITY-ST-ZIP       DELETE

**PST**      **ASTON, HARRY G.**      **3350 ULMERTON ROAD**      **CLEARWATER FL**

**VD**      **MONTGOMERY, ROSS**      **3350 ULMERTON RD.**      **CLEARWATER FL**

DELETE

DELETE

DELETE

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE      1.2 NAME      1.3 STREET ADDRESS      1.4 CITY-ST-ZIP       Change       Addition

2.1 TITLE      2.2 NAME      2.3 STREET ADDRESS      2.4 CITY-ST-ZIP       Change       Addition

3.1 TITLE      3.2 NAME      3.3 STREET ADDRESS      3.4 CITY-ST-ZIP       Change       Addition

4.1 TITLE      4.2 NAME      4.3 STREET ADDRESS      4.4 CITY-ST-ZIP       Change       Addition

5.1 TITLE      5.2 NAME      5.3 STREET ADDRESS      5.4 CITY-ST-ZIP       Change       Addition

6.1 TITLE      6.2 NAME      6.3 STREET ADDRESS      6.4 CITY-ST-ZIP       Change       Addition

14. I 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, with all other like empowered.

SIGNATURE: *[Signature]*      DATE: **1-5-99**      DAYTIME PHONE #: **727-573-2300**

CR2E034 (11/98)