

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P97000106349
 1. Entity Name
 MCS INVESTMENTS GENERAL PARTNER, INC.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 DEC 20 PM 1:51

Principal Place of Business Mailing Address
 165 N. Beltline Hwy. 165 N. Beltline Hwy.
 Mobile, AL 36608 Mobile, AL 36608

600004744436--3
 -12/31/01--01040--003
 ****150.00 ****150.00

2. Principal Place of Business
~~165 N. Beltline Hwy.~~
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number
 63-1189875 Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 Rob Blue JR
 221 McKenzie Ave
 Panama City FL 32401

7. Name and Address of New Registered Agent
 Name: Rob Blue JR
 Street Address (P.O. Box Number is Not Acceptable)
 221 McKenzie Ave
 City: Panama City FL Zip Code: 32401

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$350.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added in Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Burton, J. R. 165 N. Beltline Hwy. Mobile, AL 36608 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Smith, Margaret C. 165 N. Beltline Hwy. Mobile, AL 36608 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Posey, James H. 165 N. Beltline Hwy. Mobile, AL 36608 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Smith, Norvelle L. 3929 Yester Place Mobile, AL 36608 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Johnson, Richard 29922 Burke Lane Orange Beach, AL 36561 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 included 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like employees.

SIGNATURE: [Signature] Date _____ Daytime Phone # _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)

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MCS INVESTMENTS GENERAL PARTNER, INC.

165 N. Beltline Hwy., Mobile, AL 36608

Telephone: 251-341-5777 Fax: 251-341-5763

November 5, 2001

Division of Corporations
Annual Report /Reinstatement Section
P O Box 6327
Tallahassee, FL 32314-6327

Please accept the enclosed 2001 Annual Report of MCS Investments General Partner, Inc. and related \$150.00 payment.

Please waive the \$600.00 reinstatement fee. We did not receive the previous notice to file and were unaware that we were delinquent with this report.

Thank you for your help with this matter.


J. Bob Burton

JRB/jn