FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION* ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL 27 PM 12: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/01/95--01063--001
****225.00

DOCUMENT # 619010 (2)

1. Corporation Name

THE MACK COMPANY OF FLORIDA

Principal Place of Business	Mailing Address
501 EAST KENNEDY BLVD. C/O J. BOB HUMPRIES. ESQ PO BOX 1438 TAMPA FL 33602-5200	501 EAST KENNEDY BLVD. C/O J. BOB HUMPRIES. ESQ PO BOX 1438 TAMPA FL 33602-5200

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/25/1979

3a. Date of Last Report: 06/27/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 | County — 25 | Zip — 29 | County — 30

4. FEI Number: 59-1900365 ☐ 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

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CUSACK, JAMES J.
~~501 E. KENNEDY BLVD.~~ 100 N. Tampa Street
SUITE ~~1700~~ 3100
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

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

03

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 _____ DATE

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	MACK,WILLIAM L.	12 NAME	
STREET ADDRESS	370 W PASSAIC ST	13 STREET ADDRESS	
CITY ST ZIP	ROCHELLE PK NJ	14 CITY ST ZIP	
TITLE	DVST	21 TITLE	☐ Change ☐ Addition
NAME	MACK,EARLE I.	22 NAME	
STREET ADDRESS	370 W PASSAIC ST.	23 STREET ADDRESS	
CITY ST ZIP	ROCHELLE PK NJ	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	MACK,DAVID	32 NAME	
STREET ADDRESS	370 W PASSAIC ST	33 STREET ADDRESS	
CITY ST ZIP	ROCHELLE PK NJ	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	MACK,FREDERIC	42 NAME	
STREET ADDRESS	370 W PASSAIC ST	43 STREET ADDRESS	
CITY ST ZIP	ROCHELLE PK NJ	44 CITY ST ZIP	
TITLE	AS	51 TITLE	☐ Change ☐ Addition
NAME	CUSACK,JAMES J.(ASST)	52 NAME	
STREET ADDRESS	501 E. KENNEDY BLVD.	53 STREET ADDRESS	100 N. Tampa Street, Ste 3100
CITY ST ZIP	TAMPA FL	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: James J. Cusack, Assistant Secretary — 7/20/95 — (813) 221-3100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0290039 CP