## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 208253

(5)

MCKINNEY-GREEN INC

STREET ADDRESS CITY-ST-ZIP

## FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address P O BOX 14484 P O BOX 14484 GAINESVILLE FL 32604-9484 GAINESVILLE FL 32604-9484 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/16/1957 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-0815408 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREEN, ALONZO FRANK 4140 N W 27TH LANE SUITE G 82 Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE, FL 83 32606-3600 84 City 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 Signature, typed or printed name of registered agent and title if explicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **GREEN, PAUL MICHAEL** NAME 1.2 NAME 4140 N W 27TH LANE G STREET ADDRESS 1.3 STREET ADDRESS GAINESVILLE, FL 00000 3久なかん 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE **WEIDLER, J PHILLIP** NAME 2.2 NAME 4140 N W 27TH LANE G STREET ADDRESS 2.3 STREET ADDRESS GAINESVILLE, FL 00000 3 & La G CITY-ST-ZIP 2 4 CiTY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE **GREEN, ALONZO FRANK** NAME 3.2 NAME 4140 N W 27TH LANE G STREET ADDRESS 3.3 STREET ADDRESS GAINESVILLE, FL 00000 ジス しゃく・ CITY-ST-ZIP 3.4. CITY - ST- ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE 6.2 NAME NAME

14. Thereby 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 tystice 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 attacting of the corporation of the corporation of the receiver of this receiver of the corporation of the corporation of the receiver of the receiver

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP