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PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **280015** **(9)**

1. Corporation Name
M. C. SULLIVAN INC.

Principal Place of Business	Mailing Address
716 SOUTH REEDY BOULEVARD FROSTPROOF FL 33843	716 SOUTH REEDY BOULEVARD FROSTPROOF FL 33843

3. Date Incorporated or Qualified: 04/01/1964
3a. Date of Last Report: 04/15/1996

2. Principal Place of Business
21: 109 N. SCENIC HWY
22: Suite, Apt. #, etc.
23: City & State: FROSTPROOF, FL
24: Zip: 33843
25: Country: USA

2a. Mailing Address
26: 109 N. SCENIC Hwy
27: Suite, Apt. #, etc.
28: City & State: FROSTPROOF, FL
29: Zip: 33843
30: Country: USA

4. FEI Number: 59-1038541 ☐ 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

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

9. Name and Address of Current Registered Agent

SULLIVAN, JAMES L.
109 N. SEENIC HIGHWAY
FROSTPROOF FL 33843

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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: James L. Sullivan JAMES L. SULLIVAN - SECRETARY 2/26/97
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	D	☒ Change ☐ Addition
NAME	SULLIVAN,M C		1.2 NAME	SULLIVAN, M.C.	
STREET ADDRESS	716 LAKE REEDY BLVD.		1.3 STREET ADDRESS	716 LAKE REEDY BLVD	
CITY-ST-ZIP	FROSTPROOF FL		1.4 CITY-ST-ZIP	FROSTPROOF, FL 33843	
TITLE	SD	☐ DELETE	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	SULLIVAN,GRACE E		2.2 NAME	GRACE E. SULLIVAN	
STREET ADDRESS	716 LAKE REEDY BLVD.		2.3 STREET ADDRESS	716 S. LAKE REEDY BLVD	
CITY-ST-ZIP	FROSTPROOF FL		2.4 CITY-ST-ZIP	FROSTPROOF, FL 33843	
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SULLIVAN, ROBERT G.		3.2 NAME		
STREET ADDRESS	716 S. LAKE REEDY		3.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL		3.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	SULLIVAN, JAMES L.		4.2 NAME	JAMES L. Sullivan	
STREET ADDRESS	109 N SCENIC HWY		4.3 STREET ADDRESS	109 N. SCENIC HWY	
CITY-ST-ZIP	FROSTPROOF FL		4.4 CITY-ST-ZIP	FROSTPROOF, FL 33843	
TITLE	D	☐ DELETE	5.1 TITLE	PD	☒ Change ☐ Addition
NAME	SULLIVAN, MATTHEW		5.2 NAME	MATTHEW SULLIVAN, SR	
STREET ADDRESS	604 E WINTHROP		5.3 STREET ADDRESS	604 E. WINTHROP	
CITY-ST-ZIP	AVON PARK FL		5.4 CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SULLIVAN, ALLEN		6.2 NAME		
STREET ADDRESS	294 LAKE AVE S.		6.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL		6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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.

SIGNATURE: James L. Sullivan JAMES L. Sullivan 2/24/97 941 635-2593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

052488