

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90167 026 ***150.00

DOCUMENT # 336056

1. Entity Name

MGL, INC.

Principal Place of Business

**4821 N. DIXIE HWY.
 BOCA RATON FL 33429-8137
 US**

Mailing Address

**4821 N. DIXIE HWY.
 BOCA RATON FL 33431
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1225145**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**NICKLIN, GEORGE K
 340 NW 19TH ST. 208
 BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name

Nicklin, George K

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

340 NE 23rd Way

City

Boca Raton

FL

Zip Code

33431

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **NICKLIN, CONSTANCE F.**
 STREET ADDRESS **3100 VOLCO RD.**
 CITY-ST-ZIP **EDGEWATER FL**

TITLE **STD** ☐ Delete
 NAME **NICKLIN, JUDITH A**
 STREET ADDRESS **340 NE 23 WAY**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **PD** ☐ Delete
 NAME **NICKLIN, GEORGE K**
 STREET ADDRESS **340 NE 23 WAY**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **Nicklin, Constance F**
 STREET ADDRESS **9519 SW 138th Street**
 CITY-ST-ZIP **Archer, FL 32618**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 indicated 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 607, 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 empowered.

SIGNATURE:

Judith A Nicklin

Judith A Nicklin Sec/Trea 561 391 2483

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)