

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

FILED  
Apr 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 458608

(7)

1. Corporation Name

JOHN E. MCCAUSLAND, INC.

Principal Place of Business

P.O. BOX 3202  
JACKSONVILLE FL 32206-3202

Mailing Address

P.O. BOX 3202  
JACKSONVILLE FL 32206-3202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/25/1974

4. FEI Number

59-1547408

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

MCCAUSLAND, JOHN E.  
136 19TH AVENUE NORTH  
JACKSONVILLE BCH. FL 32250

10. Name and Address of New Registered Agent

81 Name

Samuel L. LePrell

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

901 Blackstone building

83

233 E. Bay St

84 City

Jacksonville

FL

85 Zip Code

32202

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 true if applicable

(NOTE: Registered Agent's signature required when reinstating)

1/15/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME MCCAUSLAND, JOHN E.  
STREET ADDRESS 136 19TH AVENUE NORTH  
CITY-ST-ZIP JACKSONVILLE BCH. FL

TITLE SD ☐ DELETE

NAME PARNABY, GEORGE R., JR.  
STREET ADDRESS 4540 SOUTHSIDE BLVD STE 1  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President / Director ☐ Change ☒ Addition

1.2 NAME Lawrence M. McBoough

1.3 STREET ADDRESS 136 19th Ave N.

1.4 CITY-ST-ZIP Jacksonville Bch Fla.

2.1 TITLE SECRETARY, TREASURER, Director ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Vice President ☐ Change ☒ Addition

3.2 NAME Scott Bodkin

3.3 STREET ADDRESS 10983 Prospector Dr.

3.4 CITY-ST-ZIP Jacksonville, Fla.

4.1 TITLE Chairman / Director ☒ Change ☐ Addition

4.2 NAME John E. McCausland

4.3 STREET ADDRESS 136 19th Ave N.

4.4 CITY-ST-ZIP Jacksonville Beach Fla.

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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.

CR2E034 (10/97)