


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

FILED

Jan 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 556850 (6)  
1. Corporation Name  
MACC, INCORPORATED

Principal Place of Business 1013 SEASIDE DR SARASOTA FL 34242	Mailing Address 1013 SEASIDE DR SARASOTA FL 34242
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/30/1977	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1802454	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BERLICK, FLORENCE  
1013 SEASIDE DR  
SARASOTA FL 34242

10. Name and Address of New Registered Agent

81	Name	Ms. Genda Blue	
82	Street Address (P.O. Box Number is Not Acceptable)	1013 Seaside Drive	
83			
84	City	Sarasota	FL
85	Zip Code	34242	

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 GERDA BLUE 30th Jan Blue 01-17-98  
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	NAME	1.1 TITLE	Change Addition
NAME	CLARK, O.M. JR	1.2 NAME	
STREET ADDRESS	501 THIRD ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	PIKEVILLE KE	1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	Change Addition
NAME	VD	2.2 NAME	
STREET ADDRESS	HAMILTON, A.A.	2.3 STREET ADDRESS	
CITY-ST-ZIP	708 SCOTT AVE	2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	Change Addition
NAME	STD	3.2 NAME	
STREET ADDRESS	RATLIFF, G.L.	3.3 STREET ADDRESS	
CITY-ST-ZIP	702 SCOTT AVE	3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	Change Addition
NAME	VP	4.2 NAME	
STREET ADDRESS	CLARK, O. MAYO III	4.3 STREET ADDRESS	
CITY-ST-ZIP	SECOND & CAROLINE	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: D. O. M. CLARK JR 1/17/98 606 437-7487  
Signature and typed or printed name of signing officer or director Date Daytime Phone # 0457445

CR2E034 (10/97)