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FILED
Apr 27 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 # 685775 (9)
1. Corporation Name
JOHN KIRK MCDONALD, P.A.



Principal Place of Business
THE LAW CENTER
370 MINORCA AVENUE
CORAL GABLES FL 33134

Mailing Address
THE LAW CENTER
370 MINORCA AVENUE
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 1217 N. GREENWAY DR
Suite, Apt. #, etc.
22 City & State
23 CORAL GABLES FL
Zip
24 33134
Country
25 USA
2a. Mailing Address
26 1217 N. GREENWAY DR
Suite, Apt. #, etc.
27 City & State
28 CORAL GABLES FL
Zip
29 33134
Country
30 USA

3. Date Incorporated or Qualified
08/28/1980
4. FEI Number
59-2056651
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MCDONALD, JOHN KIRK
1217 N GREENWAY DRIVE
CORAL GABLES FL 33134

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

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

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

DATE

12. OFFICERS AND DIRECTORS
TITLE PD
NAME MCDONALD, JOHN KIRK
STREET ADDRESS 1217 N GREENWAY DRIVE
CITY-ST-ZIP CORAL GABLES FL
TITLE S
NAME MCDONALD, GLORIA
STREET ADDRESS 1217 N GREENWAY DRIVE
CITY-ST-ZIP CORAL GABLES FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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.

SIGNATURE:

[Signature]

4-21-98 305-448-0195

CR2E034 (10/97)