

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 687878 (9)

1. Corporation Name

MCGEEHAN & SONS, INC.

Principal Place of Business

Mailing Address

**5426 SPRING HILL DRIVE
SPRING HILL FL 34606**

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SPRING HILL FL 34606**



2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		
22 City & State	27 City & State		
23 Zip	28 Zip	29 Country	30 Country

3. Date Incorporated or Qualified 09/16/1980	3a. Date of Last Report 09/21/1995
4. FEI Number 59-2352666	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

**MCGEEHAN, MARGARET M.
5426 SPRING HILL DRIVE
SPRING HILL FL 34606**

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 607.0503, Florida Statutes.

SIGNATURE: *Margaret M. McGeehan* **MARGARET M. McGEEHAN** Seal Expires **6-24-96**
(Signature of officer or director of corporation or registered agent and not applicable) (Not for Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MCGEEHAN, CONNELL H	1.2 NAME	
STREET ADDRESS	497 SAVOY CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 0	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	MCGEEHAN, KEVIN S	2.2 NAME	
STREET ADDRESS	5426 SPRING HILL DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 0	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	MCGEEHAN, HUGH C	3.2 NAME	
STREET ADDRESS	497 SAVOY CT.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 0	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	HENGESBACH, ALAN	4.2 NAME	
STREET ADDRESS	3081 WATERFALL	4.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 0	4.4 CITY-ST-ZIP	
TITLE	STD	5.1 TITLE	☐ Change ☐ Addition
NAME	MCGEEHAN, MARGARET M	5.2 NAME	
STREET ADDRESS	497 SAVOY CT.	5.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 0	5.4 CITY-ST-ZIP	
TITLE		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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Margaret M. McGeehan* **MARGARET M. McGEEHAN** 6-24-96 352-686-1234
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)