Applied For

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 687878

25

1. Corporation Name

MUGEEHAN & SUNS, INC.		
Principal Place of Business	Mailing Address	
5426 SPRING HILL DRIVE SPRING HILL FL 34606	5426 SPRING HILL DRIVE SPRING HILL FL 34606	
2. Principal Place of Business	2a. Mailing Address	
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	
City & State	City & State	
Zin Country	28 Country	

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FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90203 038 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

Trust Fund Contribution

Personal Property Tax.

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

09/16/1980

<u>59-2352666</u>

4. FEI Number

	Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
			81	Name					
MCGEEHAN, MARGARET M. 5426 SPRING HILL DRIVE			82	82 Street Address (P.O. Box Number is Not Acceptable)					
			02	Oli Cet /	Address (F.O. Dox Humber to Not Acceptable)				
SPRI	NG HILL FL 34606		83						
						85 Zip C			
	•		84	City	FL	85 Zip C	ode		
office or re agent. I ar	to the provisions of Sections 607.0502 and 607.1 sgistered agent, or both, in the State of Florida. S in familiar with, and accept the obligations of, Sec	Such change was autho	onzed by	the corpo	corporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoin	hanging its tment as reg	registered jistered		
SIGNATURE	Signature, typed or printed name of registered agent and title if appl	icable. (NOTE: Reg	jistered Agen	t signature r	equired when reinstating) DATE				
12.	OFFICERS AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFICERS AND				
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition		
NAME	MCGEEHAN, CONNELL H		1.2 NAME						
STREET ADDRESS	497 SAVOY CT.		1.3 STREET ADDI						
CITY-ST-ZIP	SPRING HILL, FL 0	_	1.4 CITY- \$1	r-ZIP					
TITLE	, D	☐ DELETE	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-S	T-ZIP					
TITLE	D	☐ DELETE	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-S	T-ZIP					
TITLE	D	DELETE	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-\$1	Γ-ZIP					
TITLE	STD	☐ DELETE	5.1 TTTLE			Change	Addition		
NAME	MCGEEHAN, MARGARET M		5.2 NAME						
STREET ADORESS	497 SAVOY CT.		5.3 STREET	ADDRESS					
CITY-ST-ZIP	SPRING HILL, FL 0		5.4 CITY-ST	Γ-ZIP					
TITLE		☐ DELETE	6.1 TITLE			Change	Addition		
NAME			6.2 NAME				}		
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP.			6.4 CITY-ST						
14. I hereby of indicated	ertify that the information supplied with this filing on this annual report or supplemental annual rep	does not qualify for the ort is true and accurate	e exempti e and that	on stated t my sign	d in Section 119.07(3)(i), Florida Statutes. I further cert lature shall have the same legal effect as if made unde	fy that the ir r oath; that I	nformation am an		