

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

96 NOV 19 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 828596

1. Corporation Name

Homac Mfg. Company

Principal Place of Business

12 Southland Road
Ormond Beach, FL 32174

Mailing Address

12 Southland Road
Ormond Beach, FL 32174

REINSTATEMENT

3. Date Incorporated or Qualified
9/5/72

3a. Date of Last Report
4/95

2. Principal Place of Business

21 12 Southland Road

Suite, Apt. #, etc.

22

City & State

23 Ormond Beach, FL

Zip

24 32174

Country

25 U.S.A.

2a. Mailing Address

26 12 Southland Road

Suite, Apt. #, etc.

27

City & State

28 Ormond Beach, FL

Zip

29 32174

Country

30 U.S.A.

4. FEI Number

22-1814647

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

McGrane, Eugene W., Jr.
12 Southland Road
Ormond Beach, FL 32174

10. Name and Address of New Registered Agent

81 Name

McGrane, Mark A.

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

12 Southland Road

83

City

Ormond Beach

FL

84

Zip Code

32174

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

Mark A. McGrane

Mark A. McGrane, President

11/1/96

12. OFFICERS AND DIRECTORS

TITLE P/T ☒ DELETE
NAME McGrane, Eugene W., Jr.
STREET ADDRESS 2713 S. Atlantic Avenue
CITY-ST-ZIP Daytona Beach Shores, FL 32118

TITLE V/S ☐ DELETE
NAME McGrane, Mark A.
STREET ADDRESS 2001 North Beach Street
CITY-ST-ZIP Ormond Beach, FL 32174

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 ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE P/D ☒ Change ☐ Addition
2.2 NAME McGrane, Mark A.
2.3 STREET ADDRESS 2001 North Beach Street
2.4 CITY-ST-ZIP Ormond Beach, FL 32174

3.1 TITLE S/D ☐ Change ☒ Addition
3.2 NAME McGrane, Daniel
3.3 STREET ADDRESS 440 Triton Road
3.4 CITY-ST-ZIP Ormond Beach, FL 32174

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(a), 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:

Mark A. McGrane

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark A. McGrane, President

11/1/96 604-444-9110

CR2E034 (12/95)