

222-93 B-1442-C
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 9:52

DOCUMENT # F52657

(6)

1. Corporation Name

MCCOY ENTERPRISES OF ORLANDO, INC.

Principal Place of Business

U.S. 192 WEST
7770 W. IRLO BRONSON MEM. HWY.
KISSIMMEE FL 34746

Mailing Address

U.S. 192 WEST
7770 W. IRLO BRONSON MEM. HWY.
KISSIMMEE FL 34746

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/02/1981

3a. Date of Last Report

04/26/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

59-2355527

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

MCCOY, LEONARD
6499 BRANDON DRIVE.
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent

81

Name

MCCOY, LEONARD

82

Street Address (P.O. Box Number is Not Acceptable)

8306 BOB-O-LINK DR

83

84

City

WEST PALM BEACH, FL

85

Zip Code

33412

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

Leonard J. McCoy

(NOTE: Registered Agent signature required when reappointing)

2/14/95
DATE

12. OFFICERS AND DIRECTORS

TITLE

V

NAME

VARNEY, RALPH W.E., JR.

STREET ADDRESS

1025 DOVE RUN RD STE 109

CITY-ST-ZIP

LEXINGTON, KY 00000

TITLE

STD

NAME

MCCOY, JOSEPH

STREET ADDRESS

2800 BRYANT ROAD

CITY-ST-ZIP

LEXINGTON KY

TITLE

PD

NAME

MCCOY, LEONARD

STREET ADDRESS

6499 BRANDON DRIVE

CITY-ST-ZIP

PALM BCH GRDNS, FL 00000

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

NO LONGER V

☒ Change

☐ Addition

1.2 NAME

RALPH VARNEY

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

PD

☒ Change

☐ Addition

3.2 NAME

MCCOY, LEONARD

3.3 STREET ADDRESS

8306 BOB-O-LINK DR

3.4 CITY-ST-ZIP

WEST PALM BEACH, FL 33412

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Leonard J. McCoy

2/14/95

Date

Signature Place