

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

FILED

May 01 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 # F97000003786 (7)

1. Corporation Name

MACHO GRANDE, INC.

Principal Place of Business

301 CONGRESS AVENUE, SUITE 1900
AUSTIN TX 78701

Mailing Address

301 CONGRESS AVENUE, SUITE 1900
AUSTIN TX 78701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/21/1997

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

52-2046207

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PVC	<input checked="" type="checkbox"/> DELETE
NAME	GIORDANI, LESLIE C	
STREET ADDRESS	301 CONGRESS AVENUE, SUITE 1900	
CITY-ST-ZIP	AUSTIN TX 78701	

TITLE	CVST	<input checked="" type="checkbox"/> DELETE
NAME	SCHURIG, ELIZABETH M	
STREET ADDRESS	301 CONGRESS AVENUE, SUITE 1900	
CITY-ST-ZIP	AUSTIN TX 78701	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	OP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	EDWIN M. FARAHLEY	
1.3 STREET ADDRESS	200 CARTER'S GROVE LANE	
1.4 CITY-ST-ZIP	LYNCHBURG, VA 24503	

2.1 TITLE	VSTO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	ROBERT M. SMITH, JR.	
2.3 STREET ADDRESS	1450 S. DIXIE HWY, STE 101	
2.4 CITY-ST-ZIP	BOCA RATON, FL 33432	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:



4/24/98 (561) 338-3298

CR2E034 (1097)