SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
95 JUL 25 AM 10: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G26563** **(8)**

1. Corporation Name
MCCAIN & LYNCH, P.A.

Principal Place of Business	Mailing Address
% STEVEN R. MCCAIN 900 VIRGINIA AVENUE. SUITE 12 FORT PIERCE FL 34982	% STEVEN R. MCCAIN 900 VIRGINIA AVENUE. SUITE 12 FORT PIERCE FL 34982

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/04/1983
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business: 21 515 So. Indian River Dr.
Suite, Apt. #, etc: 22
City & State: 23 Ft. Pierce, FL
Zip: 24 34950
Country: 25 St. Lucie

2a. Mailing Address: 26 P.O. Box 3779
Suite, Apt. #, etc: 27
City & State: 28 Ft. Pierce, FL
Zip: 29 34948-3779
Country: 30 St. Lucie

4. FEI Number: 59-2361752 ☐ 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

MCCAIN, STEVEN R.
900 VIRGINIA AVENUE
SUITE 12
FORT PIERCE FL 34982

10. Name and Address of New Registered Agent

81 Name: Steven R. McCain
82 Street Address (P.O. Box Number is Not Acceptable): 515 South Indian River Drive
83
84 City: Fort Pierce, FL 85 Zip Code: 34950

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] PRES. 7/19/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PTSD	☒ Change ☐ Addition
NAME	MCCAIN, STEVEN R	12 NAME	Steven R. McCain	
STREET ADDRESS	2504 LAZY HAMMOCK LANE	13 STREET ADDRESS	2504 Lazy Hammock Lane	
CITY ST ZIP	FORT PIERCE FL	14 CITY ST ZIP	Fort Pierce, FL 34981	
TITLE	VTS	21 TITLE	Frank J. Lynch, Jr. has	☐ Change ☐ Addition
NAME	LYNCH, FRANK J. JR.	22 NAME	resigned as VTS	
STREET ADDRESS	1908 ZEPHYR AVE.	23 STREET ADDRESS		
CITY ST ZIP	FT. PIERCE FL	24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E034 (3/95)

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)(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: [signature] PRES. Steven R. McCain 7/19/95 407-461-2310
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone #

0T10451 CP