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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G75370 1. Corporation Name

MAHTEC	OF LAKE COUNTY, INC.						
Principal Place	of Business	Mailing Address				81811 erátt esett eratt es	#11 B1811 1881
C/O JACK K. AUSTIN P.O. BOX 480 17725 WILLIS V. MCCALL RD P O BOX 480 IMATIL A FL 32784 UMATILLA FL 32784					DO NOT WRITE IN THIS SPACE		
UMATILLA FL 32784 US US UMATILLA FL 32784 US					3. Date Incorporated or Qualifed		
					12/19/1983		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			59-2869515		t Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	38.75 A	kdditional = == quired
27		27			6 Station Committee Financian	\$5.00	
_	2	28			6. Election Campaign Financing Trust Fund Contribution	Added to	
Zip	Country	Zip	Country		8. This corporation owes the current ye	ar Intangible	
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Curre				10. Name and Address of New Regist	ered Agent	
		- '	81	Name			
AUSTIN, LINDA T			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
17530 WILLIS V MCCALL RD							
UMA	TILLA FL 32784		83				
			84	City		FL 85 Zip C	ode
		00 1007 4500 Ft ide Otel 40	ath a shave	named corn	oration submits this statement for the purpo	ose of changing its	registered
office or r	to the provisions of Sections 607.05t egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	tnonzed by	the corporatio	n's board of directors. I hereby accept the	appointment as rec	jistered
SIGNATURE		and title if applicable /NOTE: E	Registered Agen	it signature required	1 when reinstating) DA	ATE	
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	t oignistara regenera	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
TITLE	PSD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	AUSTIN, LINDA T		1.2 NAME				
STREET ADDRESS	AZEGO WILLIE V MCCALL DD		1.3 STREET	T ADDRESS			
CITY-ST-ZIP	UMATILLA FL 32784		1.4 CITY-S	T-ZIP			
TITLE	VP □ DELETÈ		2.1 TITLE			Change	☐ Addition
NAME	Guenther, Gerard G Jr		22 NAME				
STREET ADDRESS			2 3 STREET	T ADDRESS			
CITY-ST-ZIP	UMATILLA FL 32784		2. 4 CITY-S	ST-ZIP		[] Change	Addition
TITLE	-		3.1 TITLE			□ cuariĝe	L_ / Addition
NAME			3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CITY- S 4.1 TITLE	SI-ZIP		Change	Addition
TITLE			4.1 NAME			_ ,	_
NAME				T ADDRESS			
STREET ADDRESS			4.4 CITY-S	1			
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	1-21-		Change	☐ Addition
NAME	я 💉 😘	_	5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP	in the second		5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
			6.3 STREET	TADDRESS			

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 open attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CR2E034 (11/98)