

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

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Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H77450** (5)

1. Corporation Name
GOMAC ENTERPRISES, INC.

Principal Place of Business 1535 CYPRESS DR TEQUESTA FL 33469 US	Mailing Address 1535 CYPRESS DR TEQUESTA FL 33469-3137 US
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2. Principal Place of Business 21 3101 P.G.A BLVD Suite, Apt #, etc 22 A105 City & State 23 PALM BEACH GARDENS, FL Zip 24 33410-2812 Country 25 USA		2a. Mailing Address 26 SAME Suite, Apt #, etc 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 09/24/1985	3a. Date of Last Report 04/10/1996
		4. FEI Number 59-2572814		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 MACGREGOR, RICHARD 1535 CYPRESS DR TEQUESTA FL 33469		10. Name and Address of New Registered Agent 81 Name MACGREGOR, RICHARD 82 Street Address (P.O. Box Number is Not Acceptable) 410 THE MOLE HOLE 83 3101 P.G.A BLVD. A105 84 City PALM BEACH GARDENS FL 85 Zip Code 33410	
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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 *Richard MacGregor* **RICHARD MACGREGOR, VP** 1/15/97
Signature, typed or printed name of registered agent or officer, if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	☐ DELETE	1.1 TITLE D	☒ Change ☐ Addition
NAME MACGREGOR, CHARLES		1.2 NAME MACGREGOR, CHARLES	
STREET ADDRESS 1535 CYPRESS DR		1.3 STREET ADDRESS 3101 P.G.A BLVD. A105	
CITY-STATE-ZIP TEQUESTA FL		1.4 CITY-STATE-ZIP PALM BEACH GARDENS, FL 33410	
TITLE PSD	☐ DELETE	2.1 TITLE PSD	☒ Change ☐ Addition
NAME MACGREGOR, DONALD		2.2 NAME MACGREGOR, DONALD	
STREET ADDRESS 1535 CYPRESS DR		2.3 STREET ADDRESS 3101 P.G.A. BLVD. A105	
CITY-STATE-ZIP TEQUESTA FL		2.4 CITY-STATE-ZIP PALM BEACH GARDENS, FL 33410	
TITLE VTD	☐ DELETE	3.1 TITLE VTD	☒ Change ☐ Addition
NAME MACGREGOR, RICHARD		3.2 NAME MACGREGOR, RICHARD	
STREET ADDRESS 1535 CYPRESS DR		3.3 STREET ADDRESS 3101 P.G.A. BLVD. A105	
CITY-STATE-ZIP TEQUESTA FL		3.4 CITY-STATE-ZIP PALM BEACH GARDENS, FL 33410	
TITLE D	☐ DELETE	4.1 TITLE D	☒ Change ☐ Addition
NAME MACGREGOR, SHIRLEY		4.2 NAME MACGREGOR, SHIRLEY	
STREET ADDRESS 1535 CYPRESS DR		4.3 STREET ADDRESS 3101 P.G.A. BLVD. A105	
CITY-STATE-ZIP TEQUESTA FL		4.4 CITY-STATE-ZIP PALM BEACH GARDENS, FL 33410	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do 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 included 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: *Donald C. MacGregor* **DONALD C. MACGREGOR, PRES.** 1/15/97 775-5975
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)