

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

FILED

Feb 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **J67234** (1)

1. Corporation Name
MJR MAJOR BUILDING CORPORATION

Principal Place of Business

**955 SUNSHINE LANE
ALTAMONTE SPRINGS FL 32714
US**

Mailing Address

**955 SUNSHINE LANE
ALTAMONTE SPRINGS FL 32714-3804
US**



2. Principal Place of Business

21 **825 SUNSHINE LANE**

Suite, Apt. #, etc.

22 City & State

23 **ALTAMONTE SPRINGS, FL**

Zip

24 **32714**

Country

25 **US**

2a. Mailing Address

26 **825 SUNSHINE LANE**

Suite, Apt. #, etc.

27 City & State

28 **ALTAMONTE SPRINGS, FL**

Zip

29 **32714**

Country

30 **US**

3. Date Incorporated or Qualified

04/09/1987

3a. Date of Last Report

02/26/1996

4. FEI Number

59-2903237

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

**WRIGHT, MICHAEL T.
955 SUNSHINE LANE
ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent

81 Name

MICHAEL T. WRIGHT

82

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

825 SUNSHINE LANE

83

84

City

ALTAMONTE SPRINGS

FL

85

Zip Code

32714

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

MICHAEL T. WRIGHT, PRESIDENT

2-13-97

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 **P** ☐ DELETE

NAME **WRIGHT, MICHAEL T.**
STREET ADDRESS **763 KEENELAND PIKE**
CITY - ST - ZIP **LAKE MARY FL**

TITLE **VST** ☐ DELETE

NAME **O'DONNELL, JOHN J.**
STREET ADDRESS **1853 MISTY MORN PLACE**
CITY - ST - ZIP **LONGWOOD FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 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 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: **MICHAEL T. WRIGHT**

2-13-97

407-862-6444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)