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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K13652

(8)

MCCORY ENTERPRISES, INC.

FILED Mar 04 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address			e addition and hidde third avent ginin (if	ti dinis gilles nints himis giùis nilles (nh)
% MURRY K. 2766 GREEND SARASOTA FI	ALE DR	% MURRY K. MCCORY 2766 GREENDALE DR SARASOTA FL 24232 US			DO NOT WRITE 3. Date incorporated or Qualified	E IN THIS SPACE
					01/28/1988	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 2766 Suite, Apt.	Greendale Drive	Suite, Apt. #, etc.			65-0026271	Not Applicable
22 S 8 78:		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State		·-··-	6. Election Campaign Financing	\$5.00 May Be
23 342	32	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	try	B. This corporation owes or has pa	
24 3423	32 25 Sarasota 9. Name and Address of Current	Popletered Agent	30		Personal Property Tax due June 10. Name and Address of New Re	
		Registered Agent		Name	10. Name and Address of New Ne	gistered Agent
	CORY, MURRY K. 77 STICKNEY PT RD 1218					
· ·	RASOTA FL 34232		1		ess (P.O. Box Number is Not Acceptate Green date Drive	ole)
"	ANDOIN IE ONEVE		Ē	191		
			-	Saraso	та	85 Zip Code
]	7		FL 34232
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State (and 607 1508, Florida State	utes, the abo	ove-named corp	oration submits this statement for the poor's board of directors. I hereby acce	ourpose of changing its registered of the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, f	Florida Statu	les.		
SIGNATURE	Signature, typed or printed name of registered agen	t and tale V semicophic	OTC: Begintered	Agent eignature require	and uther respectation).	DATE
12.	OFFICERS AND		13.	There entres technic	ADDITIONS/CHANGES TO OFFIC	*****
TITLE	D	DELETE	1.1 TITL	E		Change Addition
NAME	MCCORY, MURRY K.		1.2 NAM	E		·
STREET ADDRESS	2766 GREENDALE DR	.	1.3 STR	EET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 3423			-ST-2IP		
TITLE		DELETE	2.1 TITU			Change Addition
NAME			2.2 NAM			ļ
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS (-ST-ZIP		
TITLE		DELETE	3.1 TITL			Change Addition
NAME			3.2 NAM	E		- —
STREET ADDRESS			3.3 STR	ET ADDRESS		
CITY-ST-ZIP			3.4. CIT	r-ST-ZIP	·	
TITLE		☐ DELETE	4.1 TITU			Change Addition
NAME			4. 2 NAM	~ i		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CHY 5.1 TITL	-ST-ZIP		Change
NAME :			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	6.1 TITL			Change Addition
NAME			6.2 NAM	ε [
STREET ADDRESS			6.3 STR	ET ADDRESS		
CITY-ST-ZIP			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:

Mys K. m Cous

941-378-4226