SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 97 SEP -5 PM 1: 24 ANNÚAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # K57079 (1) FRINARD MCMC, INC Principal Place of Business Mailing Address 416 WEST LANTANA ROAD 416 WEST LANTANA ROAD LANTANA FL 33462 LANTANA FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 01/10/1989 02/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0207648 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCGOWAN, RICHARD J. 416 WEST LANTANA ROAD 62 Street Address (P.O. Box Number is Not Acceptable) LANTANA FL 33482 83 84 City Zip Code **B**5 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, typed or printed name of registered agent and tire if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. THILE DELETE 1.1 TITLE Change 900002289039—7 -03/10/37—01041—011 MCGOWAN, RICHARD J. 1.2 NAME NAME 416 W. LANTANA RD. STREET ADDRESS 1.3 STREET ADDRESS ****275.00 ****275.00 LANTANA FL CITY-ST-ZIP 1.4 CMY-ST-ZIP DELETE Change Addition TITLE 21 TH F 900002289039--7 -03/10/37--01041--012 MCDOWELL, FREDERIC P. NAME * 2.2 NAME 416 W. LANTANA RD. STREET ADDRESS 2.3 STREET ADDRESS ****275.00 □ Change □ Addition LANTANA FL ****275.00 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE TITLE 32 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP Change DELETE noifitbA ... TIPLE 4.1 T(TL€ NÂME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE 6.1 TITLE TITLE

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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.

63 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

62 NAME

NAME STREET ADDRESS

CITY-ST-ZIP

CP2E034