CORP ANNUA	POFIT PORATION AL REPORT 996	FLORIDA DEPARTM Sandra B. I Secretary DIVISION OF CO	Mortnam of State		
	1ENT # K8880	06 (0)			
MAND	ell properties, inc.				
ncipal Place (of Business	Mailing Address		{	INA BULLA UTATI BURAT BURAT ATATI ATATI ATATI ATATI ATATI
518 N MAR	LD MACLEAN. JR. KET ST LLE FL 32202	% C. DONALD MACLEA 518 N MARKET ST JACKSONVILLE FL 322		3. Date Incorporated or Qualified	3a. Date of Last Report
		26. Mailing Address		05/16/1989 4. FEI Number	04/04/1995 Applied For
	ce of Business ark Forest Lane	26 922 Park F	orest Lane	59-2949184	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc. 27 Jacksonvil	le. Fl	5. Certificate of Status Desired	50.75 Additional Fee Required
City & State	sonville, FL	City 8 State	<u></u>	 Election Campaign Financing Trust Fund Contribution 	Added to Fees
3221 ¹ Zip	1 Country	28 32211	Country	8. This corporation has liability for i	ntangible tax under s 199.032,
	25 9. Name and Address of Currer	2.0	30	Florida Statutes X Yes 10. Name and Address of New R	
	5. Marine dou Marine et et et		81 Name	MacLEAN, C. DONALD, ress (P.O. Box Number is Not Acceptab	JR.
	EAN, C. DONALD, JR.		82 Street Add	ress (P.O. Box Number is Not Acceptat 922 Park Forest Lar	le) 1 P
	MARKET ST SONVILLE FL 32202		83	<u> 266 ULA ULESO EU</u>	1
14020					
•		2 and 607,1508, Florida Statutes	84 City	Jacksonville, ration submits this statement for the put	FL 85 Zip Code 32211 pose of changing its registered offic ointment as registered agent. I am
I. Pursuant t or register familiar wit		clion 607.0506, Florida Statutes.	, the above-named corpo by the corporation's boa Bugested Agent signature require	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	PL 32211 pose of changing its registered offic ointment as registered agent. I am 4-26-96 DATE
I. Pursuant t or register familiar wit GNATURE 2.	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or printed name of registered agen OFFICE AS AN	nt and the if acceleration	, the above-named corpo by the corporation's boar - By general Agent signature require 13.	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	PL 32211 pose of changing its registered offic ointment as registered agent. I am 4-26-96
I. Pursuant t or register familiar wit GNATURE	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or printio name of registered agen OFFICE HS AN	It and the if acytophic of the Statutes.	, the above-named corpo by the corporation's boa Bugested Agent signature require	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officioniment as registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12
I. Pursuant t or register familiar wit GNATURE 2.	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, byted or private rank of registered agen OFFICE FIS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN	It and the if acytophic of the Statutes.	the above-named corpor by the corporation's board by the corporation's board 13. 1 1 TITLE 1 2 NAME 1.3 STREET ADDRESS	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officioniment as registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12
I. Pursuant t or register fámiliar wit GNATURE 2. ILE WE IREELADDR:SS TY - ST - ZIP	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, brief or prices name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL	It and the if acytophic of the Statutes.	the above-named corport by the corporation's board : Pagestics Agent Spreake require 13. 1 1 TITLE 12 NAME	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officioniment as registered egent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12
I. Pursuant t or register fámiliar wit GMATURE 2. 2. ILE WE REELADDRESS	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, brief or price name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL	nt and the if any fording Statutes. In and the if any fording Statutes. IND DIRECTORS DELETE IR.	the above-named corporation's boards by the corporation's boards against spheric require 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered egent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	nt and the if any fording Statutes. In and the if any fording Statutes. IND DIRECTORS DELETE IR.	the above-named corpor by the corporation's board 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
Pursuant t or register fámiliar wit GNATURE 2. 1.LE WE IREEL ADDRESS TY- ST- ZIP TLE AME	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, brief or price name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL	nt and the if any fording Statutes. In and the if any fording Statutes. IND DIRECTORS DELETE IR.	the above-named corporation's boards by the corporation's boards against spheric require 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	AT AND EXPECTIONS For ida Statutes. AT AND DURECTORS DELETE IR. DELETE	the above-named corpor d by the corporation's board 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	AT AND EXPECTIONS For ida Statutes. AT AND DURECTORS DELETE IR. DELETE	the above-named corpor d by the corporation's board 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	AT AND EXPECTIONS For ida Statutes. AT AND DURECTORS DELETE IR. DELETE	the above-named corpor by the corporation's boar 13. 1 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ration submits this statement for the pul and of directors. I horeby accept the app ed when relassing	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	In and the if activities, Florida Statutes. Int and the if activities (MOTE ND DIRECTORIS DELETE DELETE DELETE DELETE	the above-named corporation's boards of the corporation's boards of the corporation's boards of the corporation's boards of the corporation of the	ration submits this statement for the pul and of directors. I horeby accept the app ed when relasting ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
I. Pursuant t or register familiar wit GNATURE 2. ILE WE REEL ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	In and the if activities, Florida Statutes. Int and the if activities (MOTE ND DIRECTORIS DELETE DELETE DELETE DELETE	the above-named corpor by the corporation's boar 13. 1 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ration submits this statement for the pul and of directors. I horeby accept the app ed when relasting ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
I. Pursuant t or register familiar wit GNATURE 2. ILE WE REELADDRESS TY-ST-ZIP TLE AME IREETADDRESS ITY-ST-ZIP TLE AME ITHE TADDRESS ITY-ST-ZIP TLE AME	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD	In and the if activities, Florida Statutes. Int and the if activities (MOTE ND DIRECTORIS DELETE DELETE DELETE DELETE	the above-named corpor d by the corporation's board 13. 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 3 4 CITY-ST-ZIP 5 1 TITLE	ration submits this statement for the pull and of directors. I horeby accept the app ed when reliscange ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
I. Pursuant t or register familiar with GMATURE I. 2. ILE WE REELADDR:SS TY-ST-ZIP TLE AME IREETADDR:SS ITY-ST-ZIP TLE AME IREETADDR:SS ITY-ST-ZIP ITLE IAME DAFETADDR:SS STY-ST-ZIP ITLE IAME IAME IAME IAME IAME	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive number of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD JACKSONVILLE FL	In an of the integration of the statutes.	the above-named corpor d by the corporation's board 13. 13. 1 1 TITLE 12. NAME 13. STREET ADDRESS 14. CITY-ST-2IP 2. 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME	ration submits this statement for the pul and of directors. I horeby accept the app ed when relasting ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officiontment as registered agent. 1 am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive number of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD JACKSONVILLE FL	In an of the integration of the statutes.	the above-named corpor d by the corporation's board 13. 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 3 4 CITY-ST-ZIP 5 1 TITLE	ration submits this statement for the pull and of directors. I horeby accept the app ed when reliscange ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officion ointment as registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
I. Pursuant t or register familiar with GMATURE I. 2. ILE WE REELADDR:SS TY-ST-ZIP TLE AME IREETADDR:SS ITY-ST-ZIP TLE AME IREETADDR:SS ITY-ST-ZIP ITLE IAME DAFETADDR:SS STY-ST-ZIP ITLE IAME IAME IAME IAME IAME	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive number of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD JACKSONVILLE FL	In an of the integration of the statutes.	 the above-named corporation's boat by the corporation's boat 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 NAME 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 STREET ADDRESS 4 CITY-ST-ZIP 5 1 TITLE 5 NAME 5 3 STREET ADDRESS 4 CITY-ST-ZIP 5 1 TITLE 5 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE 	ration submits this statement for the pull and of directors. I horeby accept the app ed when reliscange ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officion ointment as registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, spector prive number of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD JACKSONVILLE FL	In dia of the Provided Statutes.	 the above-named corporation's boat by the corporation's boat 1 1 TITLE 1 2 NAME 1.3 STREET ADORESS 1.4 CITY - ST - ZIP 2 1 TITLE 2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3 1 TITLE 3 STREET ADORESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 3.3 STREET ADORESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.3 STREET ADORESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.3 STREET ADORESS 3.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 5.2 NAME 	ration submits this statement for the pull and of directors. I horeby accept the app ed when reliscange ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officion ointment as registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or printed measured agen OFFICERS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD JACKSONVILLE FL	ILCL DICH OF A STATUTES.	the above-named corpor by the corporation's boar 13. 1 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Participal submits this statement for the put and of directors. I horeby accept the app ADDITIONS/CHANGES TO OFF ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officion ointment as registered agent. I am 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition
	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, specific priorio name of registered agen OFFICE RS AN PD MACLEAN, C. DONALD, J 922 PARK FOREST LN JACKSONVILLE FL STD LOTT, WENDELL 3164 TOWNSEND BLVD JACKSONVILLE FL	In dia di la ri acytololo. Piorida Statutes. ni and ite il acytololo. Piori ND DIRECTORS DELETE IR. DELETE DELETE DELETE DELETE DELETE DELETE	 the above-named corporation's boat by the corporation's boat 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY - ST - ZIP 2 1 TITLE 2 NAME 2 STREET ADDRESS 2 4 CITY - ST - ZIP 3 1 TITLE 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 CITY - ST - ZIP 5 1 TITLE 5 3 STREET ADDRESS 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 6 4 CITY - ST - ZIP 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP 5 4 CITY - ST - ZIP 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 4 CITY - ST - ZIP 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 	ration submits this statement for the pull and of directors. I horeby accept the app ed when reliscange ADDITIONS/CHANGES TO OFF	FL 32211 pose of changing its registered officion international as registered eigent. Lam 4-26-96 DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition