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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF COHPORATIONS

DOCUMENT # L32951

(0)

PADDY MCGEE'S, INC.

"

FILED Mar 14 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Add	ress			1 38 BEIDIN DOM HILIM HIDIS SAIDE OFFIN HIDIS BUNKE STONE DIRECT OF HIDIS O			
2721-161 FORSYTH ROAD WINTER PARK FL 32792		2632 CAYMAN WAY WINTER PARK FL 32782-1612							
						3. Date Incorporated or Qualified 11/27/1989		e of Last I <b>8/1996</b>	Report
	lace of Business	2a. Mailing A	\ddress			4. FEI Number			spplied For
Suite, Apt. #, etc.		26	26			59-2985933		Not Applicable  \$8.75 Additional	
22	#, BIC.	27 Solie, Ap.	л. #, ыс.			5. Certificate of Status Desired			Additional Required
City & Stat	e	City & St	ate			6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution		Added	I to Fees
Zip	Country	Zip		Country	/	8. This corporation has liability for i	ntangible t	ax under	
24	25	29		30			Yes 🔀		
	9. Name and Address of Currer	nt Registered Age	ent		T	10. Name and Address of New Re	gistered A	gent	
	MPE, RICHARD L.			81	Name				
	1-181 FORSYTH RD.		82 Street A		Street Ad	dress (P.O. Box Number is Not Acceptab	le)		
WIN	ITER PARK FL 32792				ļ				
				83					
				84	City			<b>85</b> Zip	Code
					<u> </u>		FL	Ц.	
SIGNATURE	Signature, typed or printed name of registered agr					orporation submits this statement for the pration's board of directors. I hereby acceptions the properties of the proper	DATE		
TITLE	DP OFFICE TO THE	A CONTRACT OF THE PROPERTY.	DELETE	3.1 HILE	T	, and the state of		Change	Addition
NAME	KRAMPE, RICHARD L.			1.2 NAME					
STREET ADDRESS	2632 CAYMAN WAY			1.3 STREET	ADORESS				
CITY-ST-ZIP	WINTER PARK FL			1.4 CiTY - :	ST-ZIP				
TITLE	Ď	Ţ	DELETE	2.1 TITLE				Change	Addilion
NAME	Krampe, Mark H			2.2 NAME	-	•			
STREET ADDRESS	5135 LAKE HOWELL RD			2.3 S16EE	ADURESS				
CITY-ST-ZIP	WINTER PARK FL			2 4 Ci1Y -	S1-ZIP				
TITLE		L	] DELETE	3.1 TITLE		***	Į	Change	Addilion
NAME				3 2 NAME					
STREET ADDRESS				ŀ	ADDRESS				
CITY-ST-ZIP TITLE		·····	DELFTE	3.4 CITY-	ST- ZIP		1	Change	Addition
NAME			_ CALCULE	4.1 HILE				Change	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4.3 SHAT	i				
TITLE			DECETE	5170LE			[	Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				53STREE	ADDRESS				
CITY-ST-ZIP				5.4 CITY- 5	5T - 7IP				
TITLE			DELETE	G.1 TITLE				Change	Addition
NAMÉ				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY - 3	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 trusted 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.