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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L3756

(2)

MCFARLANE'S APPLIANCE CENTER, INC.

IC.

Mailing Address

## FILED Apr 24 1998 8:00am Secretary of State



21642 OCEAN PINES DR LAND O LAKES FL 34639					21642 OCEAN PINES DR LAND O LAKES FL 34639							
											DO NOT WRITE IN THIS SPACE	
											3. Date Incorporated or Qualified 12/18/1989	
Principal Place of Business     2a. Mailing Address											4. FEI Number Applied For	
21 4610 Land O'Lakes Blvd 26											<b>59-2980628</b> Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							etc.				5 Certificate of Status Desired \$8.75 Additional	
22 27											Fee Required	
h						City & State					Election Campaign Financing \$5.00 May Be	
23 Land O'Lakes FL 34639 28 Zip Country Zip											Trust Fund Contribution Added to Fees	
Z'IP				<b>⊢</b>	_	ıÞ	-	_ Country	′		8. This corporation owes or has paid the current year Intangible	
25 USA 29						30 J					Personal Property Tax due June 30. Yes X No	
9, Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent			
HILL, JOY M.								١٠.	l '	Name		
RUSCH PLAZA SUITE 112 N DALE MABRY							82	1	Street Ad	ddress (P.O. Box Number is Not Acceptable)		
LUTZ FL 33549								83				
								64		City	FL 85 Zip Code	
11. Pursuant	to the provision	ons of Se	octions 607.0	1502 and	607.	1508, Florida	Statutes,	the above	e-r	named co	orporation submits this statement for the purpose of changing its registered	
onice or r agent. I a	registered age ım familiar wit	ent, or bo th, and a	oth, in the Sta ccept the ob	ate of Fig ligations	orida sol, S	Such change ection 607.05	e was auti 505, Floric	horized by la Statutes	/ () 3.	he corpor	oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE				-								
	Signature, typed o	or printed n					(NOTE: R	agistered Age	106	signature rec	equired when reinstating) DATE	
12.			OFFICERS A	AND DIR	RECTO			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D					☐ DELE	:IE	1.1 TITLE			VP ☐ Change 🛱 Addition	
NAME	MCFARL							1.2 NAME			Jeffrey S. Rausch	
STREET ADDRESS			.Rd 23/IK					1.3 STREET	AÜ.	DDRESS	18525 Monteverde Drive	
CITY-ST-ZIP	LAND O	LAKES.	FL			- Decid		1.4 CITY - S	1-	ZIP	Springhill, FL 34610	
TITLE	D	AAR" 44	101110 E			☐ DELE	:11:	2.1 TITLE			Change Addition	
NAME	_	. = •	IOMAS E.					2.2 NAME				
STREET ADDRESS			ines dr,					2.3 STREET				
CITY-ST-ZIP	LAND O	LAKES	rL .			DELE	77	2. 4 CITY-5	31-	ZIP		
TITLE		DEI OI	MAIA I			(X) DELE	:12	3.1 TITLE			L Change Addition	
NAME	RAUSCH 21642 00							3.2 NAME				
STREET ADORESS	LAND O'							3 3 STREET				
CITY-ST-ZIP TITLE	DAMP O.	LAVE2	TL			DELE	TE	3.4. CITY - S	<b>3</b>	ZIP	Observa Tauretta	
NAME						רי) מנרנ	.16	4.1 TITLE			Change	
STREET ADDRESS							Ì	4. 2 NAME		DDECC		
								4.3 STREET				
CITY-ST-ZIP TITLE						DELE	TF	4.4 CITY - S	1-2	ZIF	Change Addition	
NAME						La VILL	.,.	5.1 THE 5.2 NAME				
STREET ADDRESS								5.3 STREET	40	,nncec	İ	
CITY-ST-ZIP								5.4 CITY-S		I .		
TITLE			<del></del>			☐ DELE	TE	6.1 TITLE	1-4	4IF	Change Addition	
NAME								62 NAME			Li Originge Li Addition .	
STREET ADDRESS								63 STREET	<u>a</u> n	Dates		
CITY-ST-ZIP												
	ertify that the	informal	tion supplied	with this	s filing	a does not a	alify for th	64 CiTY-S			in Section 119 07/3/() Florida Statutos I further certify that the information	

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.

CICNATURE

Dearing of me Souland

4/11/198

212-996-6055

CR2E034 (10/97)