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

Apr 21 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (0) MCCORMACK LAND DEVELOPMENT-FLORIDA, INC. Principal Place of Business Mailing Address 600 5TH AVE. S. 209 N. BEAVER ST. P.O. BOX 5047 SUITE 210 NAPLES FL 33940 YORK PA 17405-5047 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/01/1988 2. Principal Place of Business 4. FEL Number 2a. Mailing Address Applied For 65-0087515 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zıp Country Žιρ Country B. This corporation owes or has paid the current year Intangible X Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BRUGGER, JOHN N. 81 Name **SUITE 210** Street Address (P.O. Box Number is Not Acceptable) **600 FIFTH AVENUE SOUTH** 83 NAPLES FL 33940 84 City 85 Zip Code 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 frame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition BRUGGER, JOHN N. NAME 1.2 NAME 600 5TH AVE. S. #210 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL CITY - ST - 7iP 1.4 C(TY - ST - 7)P DELETE Change Addition TITLE 21 TITLE MCCORMACK, WEBSTER J. NAME 2.2 NAME 209 N BEAVER ST STREET ADDRESS 23 STREET ADDRESS YORK PA 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3 1 TITLE Addition MCCORMACK, JAMES D. NAME 32 NAME 209 N BEAVER ST STREET ADORESS 3.3 STREET ADDRESS YORK PA 3.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 4.1 TITLE TITLE WILSON, RAY A. NAME 4. 2 NAME 209 N BEAVER ST STREET ADDRESS 4.3 STREET ADDRESS YORK PA 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5 1 THUE MYERS, RONALD E. NAME 5.2 NAME 209 N BEAVER ST STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 eath; 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 of an an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY - ST - ZIP

NAME

YORK PA

YORK PA

BRICKER, RICHARD W (AST)

209 N BEAVER ST

Luhar Wibausser

DELETE

4/2/28

717-854-7857

Change

___ Addition

CR2E034

FILED