

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 31, 2000 8:00 am**  
**Secretary of State**

05-31-2000 90102 002 \*\*\*150.00

DOCUMENT #

MB 1508

1. Entity Name

**MACKEY ENTERPRISES, INC**

Principal Place of Business

Mailing Address

% Ted Delano  
3381 6th Ave S.E.  
Naples, FL 34117

% Ted Delano  
3381 6th Ave S.E.  
Naples, FL 34117

00007704

2. Principal Place of Business

3381 6th Ave S.E.  
Suite, Apt. #, etc.

3. Mailing Address

3381 6th Ave S.E.  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Naples, Florida

City & State  
Naples, Florida

4. FEI Number  
65-0556820

Applied For  
Not Applicable

Zip Country  
34117 Collier

Zip Country  
34117 Collier

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DELANO TED  
3381 6th Ave S.E.  
NAPLES, FL 34117

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME DELANO DEBORAH  
STREET ADDRESS 3381 6th Ave S.E.  
CITY-ST-ZIP Naples, FL 34117

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME DELANO TED  
STREET ADDRESS 3381 6th Ave S.E.  
CITY-ST-ZIP Naples, FL 34117

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME Quintana, Jose L  
STREET ADDRESS 6925 West 24th Court  
CITY-ST-ZIP Hialeah, FL 33016

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME BROWN, CHRISTINE I.  
STREET ADDRESS 3381 6th Ave S.E.  
CITY-ST-ZIP Naples, FL 34117

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Deborah Delano Pres* DEBORAH DELANO Pres.

MAY 13, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/98)