

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91241 029 ****70.00

DOCUMENT # N37797

1. Entity Name

MACDONALD TRAINING CENTER PROPERTIES, INC.

Principal Place of Business

Mailing Address

5420 W. CYPRESS STREET
 TAMPA FL 33607

5420 W. CYPRESS STREET
 TAMPA FL 33607

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3010534

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TROCKE, MICHAEL T
151 E KENNEDY BLVD
SUITE 2800
TAMPA FL 33602

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PENNINGTON, GEORGE H JR 5420 W. CYPRESS STREET TAMPA FL 33607	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TROCKE, MICHAEL T PO BOX 172609 TAMPA FL 33672-0609	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, RICHARD 2005 PAN AM CIRCLE STE 200 TAMPA FL 33607	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, PETER J 201 N FRANKLIN ST, SUITE 2100 TAMPA FL 33602	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BAUMANN, PHILLIP A. 5420 W. CYPRESS STREET TAMPA FL 33607	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Freyvogel, James M. 5420 W Cypress St Tampa FL 33607	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DeBosier, Kimberlee 1105 E Twiggs St Tampa FL 33602	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Diaz, Richard 1401 N. Westshore Blvd Suite 200 Tampa FL 33607	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kelly, Peter 100 S Ashley Drive Suite 1300 Tampa FL 33602	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Wood, Tom 101 E Kennedy Blvd Suite 2800 Tampa FL 33602	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James M. Freyvogel* **James M. Freyvogel** 4/29/02 (813) 870-1300

CR2E037 (9/01)