FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	N95000005499	(7)

1. Corporation Name MCCOY COMMERCE CENTER PROPERTY OWNERS' ASSOCIATI ON, INC. Mailing Address Principal Place of Business 505 MAITLAND AVE SUITE 200 505 MAITLAND AVE SUITE 200 ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701 3. Date incorporated or Qualified 3a. Date of Last Report 11/17/1995 Applied For 4 FFI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Country Zip Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) 82 BRUNO, ANTHONY J 505 MAITLAND AVE SUITE 200 83 ALTAMONTE SPRINGS FL 32701 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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

Signature Sign	or registere familiar with	nd agent, or both, in the State of Florida. Such change was aut n, and accept the obligations of, Section 617.0503, Florida Sta	itinonized by the corporation's call stutes.	goald of directors. Findings alongs the appearance of
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D	SIGNATURE _	to solve a board or cololled name of recisiveed about and title if applicable	(NOTE: Registered Agent signature req	dhian arien tenerasa.
D			13.	
NAME STREET ADDRESS SO MAITLAND AVE SUITE 200 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		I TOELETE	E 1.1 TITLE	Change Add
STREET ADDRESS SOS MATLAND AVE SUITE 200 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			1.2 NAME	
ALTAMONTE SPRINGS FL 32701	1	505 MAITI AND AVE SUITE 200	1.3 STREET ADDRESS	
TITLE NAME NAFTEL, JAMES A STREET ADDRESS CITY-ST-ZIP TITLE D SENKBEIL, THOMAS D 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE DELETE DELETE 21 TITLE 22 NAME 33 STREET ADDRESS A4 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE STREET ADDRESS 54 CITY-ST-ZIP TITLE NAME STREET ADDRESS 54 CITY-ST-ZIP TITLE STREET ADDRESS 54 CITY-ST-ZIP STREET ADDRESS ST	• • • • • • • • • • • • • • • • • • • •		1.4 CITY - ST - ZIP	
NAME NAFTEL, JAMES A 3520 PIEDMONT RD NE SUITE 120 23 STREET ADDRESS 24 CITY-ST-ZIP ATLANTA GA 30305 Change Addition		DELETE	E 2.1 TIFLE	Change
STREET ADDRESS CITY-ST-ZIP		NAFTEL JAMES A	22 NAME	ı
City-St-ZiP			2 3 STREET ADDRESS	
DELETE D	i		2 4 CITY - ST - ZIP	
SENKBEIL, THOMAS D 32 NAME 33 STREET ADDRESS CITY-ST-ZIP NORCROSS GA 30093-0093 DELETE 41 TITLE Change Additional Change Addit				Change Add
STREET ADDRESS 4497 PARK DR 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP Change Additional City-ST-ZIP Change		_	32 NAME	
CITY-ST-ZIP	!		3.3 STREET ADDRESS	
DELETE	1			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE 5 1 TITLE S 2 NAME 5 2 NAME 5 3 STREET ADDRESS CITY-ST-ZIP DELETE 5 1 TITLE NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP DELETE 6 1 TITLE NAME NAME NAME NAME NAME 1 2 NAME 1 2 NAME 1 3 STREET ADDRESS 5 4 CITY-ST-ZIP - 04/23/96 - 01014 - 00 Gehange Addity of the company o		DELET		☐ Change ☐ Adu
STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP Change Addition Addi	!!!		4.2 NAME	
STREET ADDRESS 44 CITY - ST - ZIP	1	1	4.3 STREET ADDRESS	
DELETE DELETE STITULE Change Additional Change Additio		ļ		
STREET ADDRESS S 3 STREET ADDRESS S 4 CITY - ST - ZIP - 04 / 23 / 96 - 01014 00 00 00 00 00 00 0		□ DELET		☐ Change ☐ Adu
STREET ADDRESS	1 ' [L	
STREET ADDRESS		1		700001700007
TITLE DELETE 61 TITLE ***61.25 NAME		ļ	Ž.,	
NAME 62 NAME		MOFEE		TUTY 25/30 UIUI TUU Change Ad
NAME		- Dicci	,	₩ ****b1.65 A/ ~
			6.3 STREET ADDRESS	7
STARET ADDRESS 6.3 STREET ADDRESS 6.4 STREET ADDRESS	STREET ADDRESS			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and about not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is tube 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 approvers to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNING OFFICER OR DIRECT

3 1 96 (407) 657-16aa