

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005136

FILED
Apr 27, 2004
Secretary of State

Entity Name: MAJ. WILLIAM HENDRICKS DET. 1019, MCL, INC.

Current Principal Place of Business:

1339 E GARY RD
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 303
LAKELAND, FL 338020303

New Mailing Address:

FEI Number: 59-3587861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WENDEL, JOHN F
WENDEL,CHRITTON,PARKS & DEBARI,CHARTERED
5300 SOUTH FLORIDA AVE
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: WHITTINGTON, LARRY
Address: 515 TIMBERLANE W. APT B
City-St-Zip: LAKELAND, FL 33801

Title: PD () Delete
Name: SARGENT, DAVID
Address: P.O. BOX 303
City-St-Zip: LAKELAND, FL 338020303

Title: SD () Delete
Name: PEWONSKI, ANTHONY
Address: P.O. BOX 303
City-St-Zip: LAKELAND, FL 338020303

Title: TD () Delete
Name: HEISLER, BERNARD
Address: P.O. BOX 303
City-St-Zip: LAKELAND, FL 33802

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SARGENT, DAVID H
Address: 2070 GRIFFIN RD STE 230
City-St-Zip: LAKELAND, FL 338100657 US

Title: PD (X) Change () Addition
Name: PEWONSKI, ANTHONY
Address: P.O. BOX 303
City-St-Zip: LAKELAND, FL 338020303

Title: SD (X) Change () Addition
Name: BALLARD, DANNY
Address: P.O. BOX 303
City-St-Zip: LAKELAND, FL 338020303

Title: TD (X) Change () Addition
Name: HUNTZINGER, JAMES
Address: P.O. BOX 303
City-St-Zip: LAKELAND, FL 33802

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID H SARGENT PHD

VD

04/27/2004

Electronic Signature of Signing Officer or Director

Date