

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005136

FILED  
Apr 21, 2005  
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:

1316 GEORGE JENKINS BLVD  
LAKELAND, FL 33801

## 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:

SARGENT, DAVID H  
PO BOX 303  
LAKELAND, FL 338020303 US

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: DAVID H SARGENT

04/21/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

VD

04/21/2005

Electronic Signature of Signing Officer or Director

Date