

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 07, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000030324**1. Entity Name
MCKINNEY COMPANIES, INC.

Principal Place of Business

1395 U.S. 1 SOUTH, STE. H

ST. AUGUSTINE
32086

FL

Mailing Address

1395 U.S. 1 SOUTH, STE. H

ST. AUGUSTINE
32086

FL

2. Principal Place of Business

5212 TIMUCUA CIRCLE

3. Mailing Address

5212 TIMUCUA CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST. AUGUSTINE

FL

City & State

ST. AUGUSTINE

FL

Zip
32086

Country

Zip
32086

Country

4. FEI Number

35-1654474

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

MCKINNEY JERRY
1395 U.S. 1 SOUTH, STE. HST. AUGUSTINE
32086

FL

7. Name and Address of New Registered Agent

Name

MCKINNEY JERRY

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

5212 TIMUCUA CIRCLE

City

ST. AUGUSTINE

FL

Zip Code
32086

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)

05/07/2001

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, 2001 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

TITLE VSD ☐ Delete
NAME MCKINNEY DEBBRA
STREET ADDRESS 1395 U.S. 1 SOUTH, STE. H
CITY-ST-ZIP ST. AUGUSTINE FL 32086TITLE PTD ☐ Delete
NAME MCKINNEY JERRY
STREET ADDRESS 1395 U.S. 1 SOUTH, STE. H
CITY-ST-ZIP ST. AUGUSTINE FL 32086TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VSD ☒ Change ☐ Addition
NAME MCKINNEY DEBBRA
STREET ADDRESS 5212 TIMUCUA CIRCLE
CITY-ST-ZIP ST. AUGUSTINE FL 32086TITLE PTD ☒ Change ☐ Addition
NAME MCKINNEY JERRY
STREET ADDRESS 5212 TIMUCUA CIRCLE
CITY-ST-ZIP ST. AUGUSTINE FL 32086TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: MCKINNEY, DEBBRA

VSD

05/07/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)