FILED
Jun 16, 2002 8:00 am
Secretary of State
05-02-2002 90119 032 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000071616

1. Entity Name
McGregor Holdings, Inc.

35489 [redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5338 Selby Drive Suite, Apt. #, etc.	5338 Selby Drive Suite, Apt. #, etc.
City & State: Ft. Myers	City & State: Ft. Myers
Zip: 33919 Country: Lee	Zip: 33919 Country: Lee

DO NOT WRITE IN THIS SPACE

4. FEI Number — ✓ Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: John McEnroe
Street Address (P.O. Box Number is Not Acceptable): 5338 Selby Drive
City: Ft. Myers FL Zip Code: 33919

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: John McEnroe [signature] 6-10-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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: V NAME: Albert E. Meyers STREET ADDRESS: 2464 Euclid Ave. CITY-ST-ZIP: Ft. Myers, FL 33901	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE: P NAME: John T. McEnroe STREET ADDRESS: 5338 Selby Drive CITY-ST-ZIP: Ft. Myers, FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] John McEnroe 4-20-02 941-229-1466
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #