

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90182 011 ***150.00

DOCUMENT # *P02000007574*

1. Entity Name

McKinnon Materials, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
18135 Crawley Road

3. Mailing Address
same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Odessa, Florida

City & State
same

4. FEI Number
26-0030061

Applied For
Not Applicable

Zip
33556

Country
U.S.A.

Zip
same

Country
same

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 Koch & Associates, P.A.; c/o William J. Edwards

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

201 North Franklin Street; Suite 3010

City Tampa

FL

Zip Code
33602

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

William J. Edwards, Koch & Associates, P.A.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-16-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Kenneth R. McKinnon (Pres., Sec., Chairman)
18135 Crawley Road
Odessa, Florida 33556

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Marylou N. McKinnon (V.P., Treas.)
18135 Crawley Road
Odessa, Florida 33556

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marylou McKinnon *Marylou McKinnon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/20/03

Daytime Phone #

727-227-2525

CR2E034B (12/02)