

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90215 023 ***150.00

DOCUMENT # P03000077479

1. Entity Name

M & M PROPERTIES OF VERO BEACH, INCORPORATED



Principal Place of Business

2345 14TH AVENUE SUITE 3
VERO BEACH FL 32960

Mailing Address

2345 14TH AVENUE SUITE 3
VERO BEACH FL 32960



2. Principal Place of Business

1826 14th AVENUE

Suite, Apt. #, etc.

SUITE 201

City & State

VERO BEACH

Zip

32960

Country

3. Mailing Address

1826 14th AVENUE

Suite, Apt. #, etc.

SUITE 201

City & State

VERO BEACH

Zip

32960

Country

1st MOORE

CR2E034 (10/04)

4. FEI Number

52-2402196

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MACWILLIAM, KEVIN
2345 14TH AVENUE SUITE 3
VERO BEACH FL 32960

7. Name and Address of New Registered Agent

Name

MAC WILLIAM, KEVIN

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

1826 14th AVENUE, SUITE 201

City

VERO BEACH

FL

Zip Code

32960

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/05

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

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 PD ☐ Delete
NAME MACWILLIAM, KEVIN
STREET ADDRESS 2345 14TH AVENUE SUITE 3
CITY-ST-ZIP VERO BEACH FL 32960

TITLE VD ☐ Delete
NAME MCCAIN, MARGARET KEYS
STREET ADDRESS 2345 14TH AVENUE SUITE 3
CITY-ST-ZIP VERO BEACH FL 32960

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SAME** ☐ Change ☐ Addition
NAME
STREET ADDRESS **1826 14th AVENUE, SUITE 201**
CITY-ST-ZIP **VB 32960**

TITLE **SAME** ☐ Change ☐ Addition
NAME
STREET ADDRESS **1826 14th AVENUE, SUITE 201**
CITY-ST-ZIP **VB 32960**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/05

Date

Daytime Phone #