

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P26598 (3)

1. Corporation Name

MCDONALD COMPUTER CORPORATION



Principal Place of Business

Mailing Address

21411 CIVIC CENTER DR.  
S100  
SOUTHFIELD MI 48076

21411 CIVIC CENTER DR.  
S100  
SOUTHFIELD MI 48076

3. Date Incorporated or Qualified  
10/23/1989

3a. Date of Last Report  
01/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
38-2187338

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCDONALD, JAMES B.  
1031 W MORSE BLVD  
S390  
WINTER PARK FL 32789

81 Name

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

1031 W. MORSE BLVD,

83 S 300

84 City

WINTER PARK

FL

85 Zip Code

32789

11. Pursuant to the provisions of Section 607.0502 and 607.1502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

*[Signature]* - PRESIDENT - JAMES B. MCDONALD X 2/15/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE

NAME MCDONALD, JAMES B.  
STREET ADDRESS 21411 CIVIC CENTER DR.  
CITY-ST-ZIP SOUTHFIELD MI

TITLE V ☐ DELETE

NAME STEVENSON, NEIL  
STREET ADDRESS 21411 CIVIC CENTER DR.  
CITY-ST-ZIP SOUTHFIELD MI

TITLE VS ☐ DELETE

NAME MCDONALD, JAMES C.  
STREET ADDRESS 21411 CIVIC CENTER DR.  
CITY-ST-ZIP SOUTHFIELD MI

TITLE V ☐ DELETE

NAME STEFANIAK, HARRY  
STREET ADDRESS 21411 CIVIC CENTER DRIVE  
CITY-ST-ZIP SOUTHFIELD MI

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 executor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an addition with an address.

SIGNATURE: X *[Signature]*

*[Signature]* PRESIDENT - JAMES B. MCDONALD X 2/15/96

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

X 2/15/96 (810) 85-9290

Date Daytime Phone #

CR2E034 (12/95)