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PROFIT
CORPORATION
ANNUAL REPORT
1997

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

FILED
97 APR 30 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P30171** **(3)**

1. Corporation Name
R.J. MCCOY, INC.

MWB

Principal Place of Business	Mailing Address
8000 BAYMEADOWS CIR. E. STE. 11 JACKSONVILLE FL 32256 US	8000 BAYMEADOWS CIR. E. STE. 11 JACKSONVILLE FL 32256-7737 US

3. Date Incorporated or Qualified: 07/10/1990
3a. Date of Last Report: 06/12/1996

2. Principal Place of Business
21 3207 Wheatley Rd.
22 Suite, Apt. #, etc.
23 City & State: Tallahassee FL
24 Zip: 32310
25 Country: USA

2a. Mailing Address
26 3207 Wheatley Rd
27 Suite, Apt. #, etc.
28 City & State: Tallahassee FL
29 Zip: 32310
30 Country: USA

4. FEI Number: 36-3648380 ☐ 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

MCCOY, RONALD J
8000 BAYMEADOWS CIR. E. #11
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 3207 Wheatley Rd.
83
84 City: Tallahassee FL 85 Zip Code: 32310

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Ronald J. McCoy President — DATE: 4/30/97
(Signature, typed or printed name of registered agent, and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MCCOY, RONALD	1.2 NAME	300002164673--9
STREET ADDRESS	3207 WHEATLEY ROAD	1.3 STREET ADDRESS	-05/02/97--01146--007
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	VS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCCOY, DELORES	2.2 NAME	MWB
STREET ADDRESS	3207 WHEATLEY ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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 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 receiver 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 attachment with an address.

SIGNATURE: Ronald J. McCoy — Ronald J. McCoy — 4/30/97 — 904-572-3731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0040759