


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P35397 (9) 1. Corporation Name CLECKLEY & MCGEE, INC.					
Principal Place of Business POST OFFICE BOX 1264 ORANGEBURG SC 29116			Mailing Address POST OFFICE BOX 1264 ORANGEBURG SC 29116-1264		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/05/1991	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		3a. Date of Last Report 03/20/1996	
22 City & State		27 City & State		4. FEI Number 57-0287724	
23 Zip Country		28 Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City FL 85 Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	DCP	MC GEE, EDGAR C.	1497 BROUGHTON ST., NW ORANGEBURG SC	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
	DVC	MC GEE, JAMES R.	333 HILLSBORO RD., NW ORANGEBURG SC	1.2 NAME	
	D	MC GEE, ROSEMARY F.	1497 BROUGHTON ST., NW ORANGEBURG SC	1.3 STREET ADDRESS	
	D	MC GEE, MARTY S.	333 HILLSBORO RD., NW ORANGEBURG SC	1.4 CITY-ST-ZIP	
	VPS	MC GEE, JAMES R.	333 HILLSBORO RD., NW ORANGEBURG SC	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
	T	MC GEE, EDGAR C.	1497 BROUGHTON ST., NW ORANGEBURG SC	2.2 NAME	
				2.3 STREET ADDRESS	
				2.4 CITY-ST-ZIP	
				3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
				3.2 NAME	
				3.3 STREET ADDRESS	
				3.4 CITY-ST-ZIP	
				4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
				4.2 NAME	
				4.3 STREET ADDRESS	
				4.4 CITY-ST-ZIP	
				5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
				5.2 NAME	
				5.3 STREET ADDRESS	
				5.4 CITY-ST-ZIP	
				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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 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, changed, or on an attachment with an address.

SIGNATURE:

E. Edgar McGee

3-14-97 813 534-5580

CR2E034 (9/96)