

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 91008 002 ***150.00

DOCUMENT # P35397

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/05/1991

4. FEI Number

57-0287724

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DCP ☐ DELETE

NAME MCGEE, EDGAR C.
STREET ADDRESS 1497 BROUGHTON ST., NW
CITY-ST-ZIP ORANGEBURG SC 29115

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE DVC ☐ DELETE

NAME MCGEE, JAMES R.
STREET ADDRESS 333 HILLSBORO RD., NW
CITY-ST-ZIP ORANGEBURG SC 29115

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME MCGEE, ROSEMARY F.
STREET ADDRESS 1497 BROUGHTON ST., NW
CITY-ST-ZIP ORANGEBURG SC 29115

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME MCGEE, MARTY S.
STREET ADDRESS 333 HILLSBORO RD., NW
CITY-ST-ZIP ORANGEBURG SC 29115

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE VPS ☐ DELETE

NAME MCGEE, JAMES R.
STREET ADDRESS 333 HILLSBORO RD., NW
CITY-ST-ZIP ORANGEBURG SC 29115

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE T ☐ DELETE

NAME MCGEE, EDGAR C.
STREET ADDRESS 1497 BROUGHTON ST., NW
CITY-ST-ZIP ORANGEBURG SC 29115

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: Edgar C Mc Gee Edgar C Mc Gee President 3-15-01 803 534 558
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR