FILED Feb 23, 1999 8:00 am

Secretary of State

02-23-1999 90056 013 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P37875

1. Corporation Name MAC ACQUISITIONS, INC.								. .	nani kidil didik iddi
Principal Place of Business Mailing Address							(1801100) (00 11311 3800) (0111 1008) D314 B3011 0101	1 81811 8	IBII 83841 BIBIF 1881
24060 DEER RUN ROAD 24060 DEER RUN ROAD							•		
BROOKSVILLE FL 34601 BROOKSVILLE FL 34601							DO NOT WRITE IN THIS S	PACE	
						3	. Date Incorporated or Qualifed		
						"	03/12/1992		
2. Principal Pla	ace of Business	2a. Mailing Address				4	. FEI Number	\Box	Applied For
21		26				1	06-1310494		Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.				5	i. Certifcate of Status Desired		5 Additional
22		27			<u> </u>				e.Required
City & State		City & State				6	i. Election Campaign Financing		00 May Be
23	Country	Zip	Col	untry			Trust Fund Contribution This corporation owes the current year Intan		ed to rees
Zip 24	25	├ ─ '	30	21 IU y		*		Yes	⊠No
24	9. Name and Address of Current	11	50	T		10). Name and Address of New Registered Ag	jent	
				81	Name				,
THE PRENTICE-HALL CORPORATION SYSTEM INC.					Street	Address (P.O. Box Number is Not Acceptable)		
1201 HAYS STREET				82	0,,001				
SUITE 105				83					
TALLAHASSEE FL 32301				84	City			85 2	Zip Code
							FL	Щ	
11. Pursuant t office or re agent. I an	o the provisions of Sections 607.0502 gistered agent, or both, in the State of n familiar with, and accept the obligatio	and 607.1508, Florida Statute f Florida. Such change was au ons of, Section 607.0505, Flor	s, the a ithorize ida Stat	bove d by lutes.	e-named the corpo	corporation s b	on submits this statement for the purpose of crooard of directors. I hereby accept the appoint	nent a	s registered
SIGNATURE							pregistating) DATE		
12.	Signature, typed or printed name of registered agent a OFFICERS AND		Registered	<u> </u>	t signature r	equired when	ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTORS IN 12
TITLE	D	DELETE	1.1 T		-			Char	
NAME	TREGURTHA, PAUL R		1.2 N	AME		Dire	ctor and Chairman		
STREET ADDRESS	248 LONG NECK POINT RD		1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	DARIEN CT		1.4 0	ITY-S1	r-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE			Dire	ctor and President	Char	nge 🔲 Addition
NAME	BRONSON, THOMAS E.	THOMAS E. 22		AME	ME			•	
STREET ADDRESS	24060 DEER RUN RD		2.3 S	TREET	ADDRESS				
CITY-ST-ZIP	BROOKSVILLE FL				2. 4 CITY-ST-ZIP				- C3 Addition
TITLE	D	**		TLE		Dire	CLOL	Char	nge 🔀 Addition
NAME	TOBIAS, GLEN A.		3.2 NA				s R. Barker		
STREET ADDRESS				3.3 STREET ADDRESS 3.4. CITY-ST-ZIP			Long Neck Point Rd.		
CITY-ST-ZIP TITLE	SCARSDALE NY S	☐ DELETE	3.4. CITY-		1-ZIP	Dari	en, CT 06820	☐ Char	nge Addition
NAME	HERLING, MICHAEL J.		4.1 MLE					_	
STREET ADDRESS	298 BROOKSIDE ROAD		ı		ADDRESS				
CITY-ST-ZIP	DARIEN CT		1	:TY-S1					
TITLE	VAS	☐ DELETE	5.1 TITLE			Dire	ctor, Vice Pres., Asst.	☑ Char	nge
NAME	LANGLOIS, ANDREW P.		5.2 N	IAME			Secy.		

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

Director

William M. Johnson

Rte. 8, Box 151

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

9 TOWER DRIVE

LANG, WESLEY W., JR.

12 MERRYWOOD LANE

WESTON CT

DELETE

1/12/99

(203) 977-8945

☐ Change

★ Addition