

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

APPROVED
AND
FILED

06 MAR 30 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P38878

1. Entity Name
MCKIM & CREED, P.A.



Principal Place of Business
243 N. FRONT ST.
WILMINGTON, NC 28401

Mailing Address
243 N. FRONT ST.
WILMINGTON, NC 28401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03282006

Chg-P

CR2E034 (11/05)

4. FEI Number
56-1292862

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEE, A. STREET
1365 HAMLET AVENUE
CLEARWATER, FL 33756

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCD ☐ Delete
NAME CREED, MICHAEL W
STREET ADDRESS 243 N FRONT ST
CITY-ST-ZIP WILMINGTON, NC 28401

TITLE Vice President/Director ☐ Change ☒ Addition
NAME A. Street Lee
STREET ADDRESS 1365 Hamlet Ave, Clearwater, FL 33756
CITY-ST-ZIP

TITLE DV ☐ Delete
NAME MCKIM, HERBERT P
STREET ADDRESS 243 N. FRONT STREET
CITY-ST-ZIP WILMINGTON, NC 28401

TITLE Ass't Secretary ☐ Change ☒ Addition
NAME Jeane Potter
STREET ADDRESS 1365 Hamlet Ave, Clearwater, FL 33756
CITY-ST-ZIP

TITLE VT ☐ Delete
NAME THOMPSON, JOHN D
STREET ADDRESS 243 N. FRONT STREET
CITY-ST-ZIP WILMINGTON, NC 28401

TITLE ☐ Change ☐ Addition
NAME 900070791729
STREET ADDRESS 04/18/06--01029--014 **70.00
CITY-ST-ZIP

TITLE DV ☐ Delete
NAME HALL, WILLIAM L JR
STREET ADDRESS 200 MACKENAN COURT, SUITE 200
CITY-ST-ZIP CARY, NC 27511

TITLE Ass't VP/Tech Dir ☐ Change ☒ Addition
NAME Mark A. Veenstra
STREET ADDRESS 1901 Mason Ave, Ste 102, Daytona Beach
CITY-ST-ZIP FL 32117

TITLE DV ☐ Delete
NAME HALSTEAD, THOMAS M
STREET ADDRESS 1365 HAMLET AVENUE
CITY-ST-ZIP CLEARWATER, FL 33756

TITLE Ass't VP/Tech Dir ☐ Change ☒ Addition
NAME Alex Dargham
STREET ADDRESS 438 Interstate Crt., Sarasota, FL 34240
CITY-ST-ZIP

TITLE VDS ☐ Delete
NAME GLASS, CHRISTOPHER H
STREET ADDRESS 200 MACKENAN COURT, SUITE 200
CITY-ST-ZIP CARY, NC 27511

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Creed
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/06 910-343-1048
Date Daytime Phone #