esson \$ 61.25 - amended

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 99 OCT - 1 PH 2: 21 **DOCUMENT #** 1. Corporation Name SECRETARIA DE STATE TALLAHASSEE, FLORIDA MCD Irrigation & Drainage, Inc. 900003009069--- 1 -10/07/39--01094--002 Principal Place of Business Mailing Address 931 Magnolia Terrace DO NOT WATE IN THIS SPACE***61.25 Flagler Beach, FL 32136 3. Date Incorporated or Qualifed February 15, 1993 2. Principal Place of Business 2a. Mailing Address 4. FF! Number Applied For 59-3179606 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes the current year Intengible **⊠**No Personal Property Tax. 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Cindy McDaniel 931 Magnolia Terrace 82 Street Address (P.O. Box Number is Not Acceptable) Flagler Beach, FL 32136 83 84 City 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 little if applicable (NOTE: Registered Agent signature requ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. President, Treasurer Director TITLE 1.1 TITLE Change Addition Ryan McDaniel 1.2 NAME 931 Magnolia Terrace STREET ADDRESS 1.3 STREET ADDRESS Flagler Beach, FL 32136 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change V.P., Secretary & DirectorELETE ☐ Addition TITLE Duane Taylor 22 NAME STREET ADDRESS 15 Casper Drive 2.3 STREET ADDRESS Palm Coast, FL 32137 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition THILE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-S1-ZiP DELETE ☐ Change Addition 51 TITLE TriLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF 6.1 TITLE TITLE DELETE ☐ Change [7] Addition

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 lines impowed.

6.4 CITY-ST-ZIP

62 NAME 6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Ryan McDaniel President