FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 19 PM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000025650 (1)**

1. Corporation Name

MAC BROTHERS, INC.

Principal Place of Business	Mailing Address
11 SOUTHEAST 7TH STREET FORT MEADE FL 33841	P.O. BOX 67 FT. MEADE FL 33841 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/02/1993	3a. Date of Last Report: 06/21/1994
4. FEI Number: 65-0421423	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip: 24 / County: 25	Zip: 29 / Country: 30

9. Name and Address of Current Registered Agent

MCCUTCHEN, LORENZO
11 SOUTHEAST 7TH STREET
FORT MEADE FL 33841

10. Name and Address of New Registered Agent

31 Name

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

33

34 FL 35 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1008, 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
TITLE: D NAME: MCCUTCHEN, JIMMY STREET ADDRESS: P.O. BOX 549 N/A CITY-ST-ZIP: FORT MEADE FL	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ Change ☐ Addition
TITLE: D NAME: MCCUTCHEN, LORENZO STREET ADDRESS: 11 SOUTHEAST 7TH STREET CITY-ST-ZIP: FORT MEADE FL 33841	TITLE: P NAME: mccutchen, Lorenzo STREET ADDRESS: 11 SouthEast 7th Street CITY-ST-ZIP: Fort Meade, FL 33841 ☑ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished pursuant to 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 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.

SIGNATURE: Lorenzo McCutchen 5/15/95 (815)-285-7734

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0448127 FP