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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 10:00

DOCUMENT # **P93000043588 (1)**

1. Corporation Name
MAC'KIE & MARNELL, P.A.

Principal Place of Business	Mailing Address
5551 RIDGEWOOD DR. #201 NAPLES FL 33963	5551 RIDGEWOOD DR. #201 NAPLES FL 33963

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/18/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0418218 ☐ 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
9. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

MAC'KIE, PAMELA S
575 WHISPERING PINE LANE
NAPLES FL 33940

10. Name and Address of New Registered Agent

61 Name: MARY MARNELL
62 Street Address (P.O. Box Number is Not Acceptable): 5551 Ridgewood Dr. #201
63:
64 City: NAPLES FL 65 Zip Code: 33963

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: Mary A. Marnell — 3/21/95
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	~~PD~~	1.1 TITLE	D/VP/S ☑ Change ☐ Addition
NAME	MAC'KIE, PAMELA S	1.2 NAME	MAC'KIE, Pamela S.
STREET ADDRESS	~~575 WHISPERING PINE LANE~~	1.3 STREET ADDRESS	5551 Ridgewood Dr. #201
CITY-ST-ZIP	~~NAPLES FL 33940~~	1.4 CITY-ST-ZIP	NAPLES, FL 33963
TITLE	~~VPSD~~	2.1 TITLE	P/T/D ☑ Change ☐ Addition
NAME	MARY MARNELL	2.2 NAME	MARNELL, MARY A.
STREET ADDRESS	5551 RIDGEWOOD DRIVE #201	2.3 STREET ADDRESS	5551 Ridgewood Dr. #201
CITY-ST-ZIP	NAPLES FL 33963	2.4 CITY-ST-ZIP	Naples FL 33963
TITLE	~~T~~	3.1 TITLE	☐ Change ☐ Addition
NAME	~~MARY MARNELL~~	3.2 NAME	
STREET ADDRESS	~~5551 RIDGEWOOD DRIVE #201~~	3.3 STREET ADDRESS	
CITY-ST-ZIP	~~NAPLES FL 33963~~	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Mary A. Marnell — 3/21/95 — 813-597-4339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

MARY A. MARNELL, PRESIDENT

0930040 CP