

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 2: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000067328 (3)

1. Corporation Name

MACOLON INCORPORATED

Principal Place of Business

355 RIVER OAKS DR
OSTEEN FL 32764

Mailing Address

355 RIVER OAKS DR
OSTEEN FL 32764

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/28/1993

3a. Date of Last Report

04/21/1994

4. FEI Number

59-3209741

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

21 20146 Bill Collins Rd

2a. Mailing Address

26 20146 Bill Collins Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Eustis, FL

City & State

28 Eustis, FL

Zip

24 32726

Country

25 USA

Zip

29 32726

Country

30 USA

9. Name and Address of Current Registered Agent

COLON, LAURA
355 RIVER OAKS DR
OSTEEN FL 32764

10. Name and Address of New Registered Agent

81 Name

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

20146 Bill Collins Rd

83

84 City

Eustis

FL

85 Zip Code

32726

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

Laura Colon Laura Colon

4-25-95

(Signature, typed or printed name of registered agent and date of appointment)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

COLON, LAURA

STREET ADDRESS

355 RIVER OAKS DR

CITY - ST - ZIP

OSTEEN FL 32764

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

20146 Bill Collins Rd
Eustis, FL 32726

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 19.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

Laura Colon Laura Colon

4/25/95

407/849-7723

(Signature and typed or printed name of signing officer or director)