

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000088292 (6)

1. Corporation Name

2801 MACDILL, INC.



Principal Place of Business

1218 WINDERMERE DRIVE
PITTSBURG PA 15218

Mailing Address

C/O JACOB & ROBERTS CO. INC.
1200 W. PLATT ST., #204
TAMPA FL 33606

3. Date Incorporated or Qualified
12/28/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 20 Walnut Street

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite 318

27 Suite, Apt. #, etc.

City & State

23 Wellesley, Mass.

City & State

28

Zip Country

24 02181

25

Zip Country

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JACOB & ROBERTS CO., INC.
1200 WEST PLATT STREET
#204
TAMPA FL 33606

81 Name

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

83

84 City

FL

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 reg. agent, agent, and director, if applicable

NOTE: Registered Agent's signature required when removing agent

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

PD
GOLUMB, RICHARD
1218 WINDERMERE DRIVE
PITTSBURG PA 15218

TITLE NAME ☐ DELETE

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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STREET ADDRESS

CITY-ST-ZIP

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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 PD ☒ Change ☐ Addition

1.2 NAME
Ehrman, Mark
1.3 STREET ADDRESS
20 Walnut Street
1.4 CITY-ST-ZIP
Wellesley, Mass. 02181

2.1 TITLE VP ☐ Change ☒ Addition

2.2 NAME
Elise Peck
2.3 STREET ADDRESS
20 Walnut Street
2.4 CITY-ST-ZIP
Wellesley, Mass. 02181

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 119.07(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 on an attachment with an address.

SIGNATURE:

Elise Peck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96

Date

617 235 0600

Display Phone #

CR2E034 (12/95)