

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 13 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000017207 (9)

1. Corporation Name  
MCGIRTS CREEK INVESTMENTS, INC.

Principal Place of Business  
225 WATER STREET, SUITE 1235  
JACKSONVILLE FL 32202

Mailing Address  
225 WATER STREET, SUITE 1235  
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/04/1994

4. FEI Number

59-3227151

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1548 Lancaster Terr.

26 1548 Lancaster Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

23 Jacksonville, FL

27

City & State

28 Jacksonville, FL

Zip

24 32204

Country

25 USA

Zip

29 32204

Country

30 USA

9. Name and Address of Current Registered Agent

PURCELL, THOMAS K  
225 WATER STREET, SUITE 1235  
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

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

83 1548 Lancaster Terr.

84 City

Jacksonville

FL

85 Zip Code

32204

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, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

ST  
NAME PURCELL, THOMAS K  
STREET ADDRESS 225 WATER ST., STE 1235  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

VP  
NAME PURCELL, CINDY  
STREET ADDRESS 225 WATER ST., STE 1235  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

P  
NAME HALL, WILLIAM M  
STREET ADDRESS 225 WATER ST., STE 1235  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE  
12 NAME  
13 STREET ADDRESS 1548 Lancaster Terr.  
14 CITY-ST-ZIP Jacksonville, FL 32204

21 TITLE ☒ Change ☐ Addition

22 NAME  
23 STREET ADDRESS 1548 Lancaster Terr.  
24 CITY-ST-ZIP Jacksonville, FL 32204

31 TITLE ☒ Change ☐ Addition

32 NAME  
33 STREET ADDRESS 1548 Lancaster Terr.  
34 CITY-ST-ZIP Jacksonville, FL 32204

41 TITLE ☐ Change ☐ Addition

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

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.

SIGNATURE

William M. Hall

1/22/98

CR2E034 (10/97)