

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000026420

1. Corporation Name

MCGHEE & MCGHEE ENTERPRISES INC.

Principal Place of Business

596 INDIGO AVENUE  
WELLINGTON FL 33414  
US

Mailing Address

596 INDIGO AVENUE  
WELLINGTON FL 33414  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

MCGHEE, CHARLES E  
2085 POLO GARDENS DR.  
WELLINGTON FL 33414

3. Date Incorporated or Qualified

04/06/1994

4. FEI Number

65-0485377

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 the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name MCGHEE, CHARLES E.

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

596 INDIGO AVENUE

83

84 City WELLINGTON

FL

85 Zip Code 33414

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

P  
NAME MCGHEE, CHARLES E  
STREET ADDRESS 596 INDIGO AVENUE  
CITY-ST-ZIP WELLINGTON FL

T ☐ DELETE

NAME MCGHEE, SUSANA S  
STREET ADDRESS 596 INDIGO AVENUE  
CITY-ST-ZIP WELLINGTON FL

S ☐ DELETE

NAME MCGHEE, SUSANA S  
STREET ADDRESS 596 INDIGO AVENUE  
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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, with all other like empowered.

SIGNATURE:

CHARLES MCGHEE

4-29-99

561-795-7738

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)