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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

## DOCUMENT # P94000058735 (9)

MCELROY INTERNATIONAL, INC.

Principal Prace of Business Mailing Address									iim sütib mitt		0(1) 02:9: 01	187 FWILL HOLD	i	8(1) (88)
412 WRIGHT D LAKE WORTH US		LAKE WORT	412 WRIGHT DRIVE LAKE WORTH FL 33461-5753 US											
		00						3. Date Incorporated or Qualified						port
2. Principal P	lace of Business	2a. Mailing	2a. Mailing Address					4. FEI Number					Ap	plied For
21		26						65-0518700					No	Applicable
Suite, Apt	#, etc.	<b>├</b>	Suite, Apt. #, etc.				5.	Certificati	e of Status	Desired				dditional
22	0	27												quired
City & State	e e		City & State			6.	8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees							
Zip	Country	Zip	Co		ountry									
24	25	29		30	,		*	This corp Florida St		s нарініў і	or intangio		ier s.	199.032,
	9. Name and Address of Cu		jent	1901			10	. Name an		s of New				·
MCE	ELROY, DAVID				81	Name				····		<del></del>		
	WRIGHT DRIVE				82	Ctroot	Addross (	D.O. Bou M	umbaria N	lat Assas	lable)			
	E WORTH FL					Sileer	Address (	Address (P.O. Box Number is Not Acceptable)						
				[	83		***************************************				· ·			
				ŀ	84	City					F	85	Zip C	ode
11. Pursuant	to the provisions of Sections 607	0502 and 607, 1508.	Florida Statut	es, the ab	ove	-named	Corporation	an submits	this staten	nent for th	DUITOGE	of changi	na its	renistered
office or re	egistered agent, or both, in the S m familiar with, and accept the o	tate of Florida, Such	change was a	authorized	i by	the corp	poration's	board of di	rectors. I I	nereby acc	cept the ap	pointmer	las	egistered
_	with the with and accept the c	bligatio is of, bection	1 001.0000, 1 1	onda Statt	Hes.									
SIGNATURE	Signature: typed or printed name of registere	d agent and title if applicable	10N)	E Registered	Ager	nt signature	e required whe	ın reinstatıng)			DATE			
12.	OFFICERS	AND DIRECTORS		13.				ADDITION:			ICERS AN	ID DIREC	TORS	S IN 12
TITLE	P		DELETE	1.1 111	ιE		Presid	dent	(CEO			Cha	nge	Addition
NAME	MCELROY, DAVID			1.2 NA	ME		1							
STREET ADDRESS	412 WRIGHT DRIVE			1.3 ST	REET	ADDRESS								
CITY - ST - ZIP	LAKE WORTH FL			14 CIT	Y-ST	- ZIP								
TITLE		L	DELETE	21 ] [	LE							Cha	nge	Addition
NAME				22 NA	ME									
STREET ADDRESS						AODRESS								
City - St - ZIP			DELETE	2. 4 CI		1-219	<u> </u>							1
TILLE		L	DELETE	3.1 TIT								Cha	nge	Addition
NAME				3.2 NA										
STREET ADDRESS						ADDRESS								
CITY - ST - ZIP TITLE			DELETE	3.4. CI		T-ZIP	<del> </del>					□ cho		Addiso
NAME		•	DECEME	4.1 (1)								L_J Cha	ige	Addition
STREET ADDRESS				4. 2 NA		ADDDECO								
CITY - ST - ZIP						ADDRESS								
THILE			DELETE	4.4 CIT 5.1 TITI		- Lir	1					☐ Cha	10e	Addition
NAME				5.2 NA								0,161	·a.	- Addition
STREET ADDRESS						ADDRESS								
CITY - ST - ZIF				5.4 CIT										
TITLE			DELETE	6.1 TIT			-					☐ Chai	nge	Addition
NAME		_		6.2 NAI									•	
STREET ADDRESS						4DORESS								
CITY - ST - ZIP				6 4 CIT										
14. I do hereh	by certify that the information sup-	plied with this filing o	does not qualit	v for the e	exen	notion si	stated in Se	ection 119.0	07(3)(i), Fk	orida Statu	ites. I furth	er certify	that t	he
information I am an of	n indicated on this angual report ficer or director of the comboration Block 12 or Block 13 if changed	or supplemental ann n or the receiver or tr	iual report is ti rustee empow	rue and a rered to ex	ccur	rate and	d that my s	ionature sh	all have th	ie same le	gal effect i	as if made	a und	er oath: that

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

David MEIroy

1/10/97

**FILED** 

Jan 27 1997 8:00am

Secretary of State

N NORTH CONTRACTOR CONTRACTOR AND CONTRACTOR AND CONTRACTOR AND CONTRACTOR AND CONTRACTOR AND CONTRACTOR AND C

561-872-448