

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 APR 24 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000059667 (3)

1. Corporation Name

MGF MACHINE WORKS, INC.

Principal Place of Business

P.O. BOX 52804
JACKSONVILLE FL 32201

Mailing Address

P.O. BOX 52804
JACKSONVILLE FL 32201-2804

2. Principal Place of Business

21 3451 West Beaver St.

Suite, Apt. #, etc.

22 City & State

23 Jacksonville, FL

24 Zip

32254

Country

25 Duval

2a. Mailing Address

26 3451 West Beaver St.

Suite, Apt. #, etc.

27 City & State

28 Jacksonville, FL

Zip

29 32254

Country

30 Duval

3. Date Incorporated or Qualified

08/12/1994

3a. Date of Last Report

04/18/1996

4. FEI Number

59-3269480

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STANLEY B. GOECKEL
3439 DOCKSIDER DR S.
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent

81 Name

Mrs. Amyjo K. Walker

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

3451 West Beaver St.

83

84 City

Jacksonville

FL

85 Zip Code

32254

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

Amyjo K. Walker

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

4.10.97

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DST
SADLER, RICHARD A SR.
3451 WEST BEAVER ST
JACKSONVILLE FL 32254

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PO
JOHANNES H. PAFFHAUSEN
3451 WEST BEAVER ST
JACKSONVILLE FL 32254

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

[Signature]

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

[Signature]

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

[Signature]

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

[Signature]

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

General Sales Manager
Johannes T. Rosendahl
3451 West Beaver St.
Jacksonville, FL 32254

☐ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

[Signature]

☐ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

000002164420-16
-05/02/97-01133-003
*****330.00 *****165.00

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

[Signature]

☐ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

[Signature]

☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

[Signature]

☐ Change ☐ Addition

14. I do 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

Johannes T. Rosendahl

4.10.97 004.354.4594

CR2E034 (9/96)