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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000062431 (9)

MCCAIN PROPERTIES. INC. Principal Place of Business Mailing Address 11580 OAKHURST RD 11580 OAKHURST RD **LARGO FL 33774 LARGO FL 33774** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/19/1994 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 65-0518095 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired \Box Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MCGAIN, GENE R 11580 OAKHURST ROAD Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 33774** В3 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 registered against and little if applicable (NOTE Registered Agent signature required when reinstating) 10/01 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE MCCAIN, GENE R NAME 1.2 NAME 11580 OAKHURST ROAD STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE MCCAIN, LEE S NAME 2.2 NAME 11580 OAKHURST ROAD STREET ADDRESS 2.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE D 3.1 TITLE MCCAIN, LAURA L NAME 32 NAME 11580 QAKHURST ROAD STREET ADDRESS 3.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE Change Addition 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE 800002449998 -03/03/38--01011--008 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 of 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

1-14-98

***150,00

FILED

Mar 06 1998 8:00am

Secretary of State

113-573-0309