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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P94000093699 (4)

1. Corporation Name
THE MAC SOURCE, INC.



Principal Place of Business: 1386 SAN LUIS COURT WINTER SPRINGS FL 32708
Mailing Address: 1386 SAN LUIS COURT WINTER SPRINGS FL 32708-4822

3. Date Incorporated or Qualified: 12/27/1994
3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-3293575
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent

DOUCETTE, TIMOTHY A
1386 SAN LUIS COURT
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 officer, 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 for the corporation with regard to the provisions of Section 607.0505, Florida Statutes.

SIGNATURE: [Signatures] DATE: [Date]

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS table with columns for Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 table with columns for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and 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: Kimberly Doucette
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DATE: 04/30/97
Daytime Phone #: (407) 365-3060

CR2E034 (9/96)