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 # P9500005732 1. Corporation Name

MCDONALD & ASSOCIATES, INC.

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90102 034 ***150.00



Principal Place	of Business	Mailing Address				(1884)rg råråt ærtir ga	(1) 68 141 86 316 8	8171 88581 83111 18898	INTERPORTURE		
652 LOCK RD. DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442						DO NOT V	WRITE IN T	HIS SPACE			
					3 Date Inco	3. Date incorporated or Qualifed					
					01/19/				ļ		
2 Principal Pl	ace of Business			4. FEI Num			Ani	plied For			
21 2952	RANCHETTE SQ.	2a. Mailing Address 26 2952 RAUCH	Tle.	Sa	59-330			<u> </u>	t Applicable		
Suite, Apt.		Suite, Apt. #, etc.	.,,~	9				\$8.75			
	Breeze, FL	27 GULF Breeze	> . L	Z _	5. Certifcate	of Status Desire	d 🔲	Fee Re	I .		
City & State City & State					6. Election	Campaign Financ	ina	\$5.00	May Be		
23 3256	·			Trust Fund Contribution Added to Fees					, ,		
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible						
24	25	29 30]		Personal Property Tax.						
•	9. Name and Address of Current	Registered Agent			10. Name ar	nd Address of Ne	ew Register	ed Agent			
					81 Name DONALD A. MCDONALD						
MCDONALD, DONALD A				82 Street Address (P.O. Box Number is Not Acceptable).							
652 LOCK ROAD				Z	1952	PANChett	e Sa				
DEERFIELD BEACH FL 33442					NE RC	ere .	+, '				
			84		NE BU	<u>e</u> 20,	<u> </u>	es 7in C	oho.		
			84	City			F	-L 85 Zip C	36/		
office or re	o the provisions of Sections 607.0502 agistered agent, or both, in the State of in familiar with, and accept the obligation	rporation submits tion's board of dire	this statement for ectors. I hereby a	the purpose ccept the ap	e of changing its opointment as reg	registered gistered					
	Translat War, and decopt the congulat	31, 3001011 027100011 107100		-					{		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Reg	jistered Age	nt signature requ	rred when reinstating)		DATE	·			
12.	OFFICERS AND	DIRECTORS	13.		ADDITION	IS/CHANGES TO	OFFICERS	AND DIRECTO	RS IN 12		
TITLE	PDC	☐ DELETE	1.1 TITLE					Change Change	Addition		
NAME	MCDONALD, DONALD A		12 NAME	1	,	. , 11	_		j		
STREET ADDRESS	652 LOCK ROAD		1.3 STREE	T ADDRESS	2952 K	MUCHETTE	_ ⊸ 6				
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		1.4 CITY-S	T-ZIP (2952 K GULF BI	eeze, #	در ع	32561			
TITLE	VDS	☐ DELETE	2.1 TITLE					Change	☐ Addition ∤		
NAME	MCDONALD, MARGARET S		2.2 NAME			~ / <i>!!</i>					
STREET ADDRESS	652 LOCK ROAD		2.3 STREE	T ADDRESS	2952 A	CANChem	e 39				
CITY-ST-ZIP	DEERFIELD BEACH FL		2. 4 CITY-S	ST-ZIP	2957 A	eeze,	FL 3	32561			
TITLE	VDT -	☐ DELETE	3.1 TITLE					Change	☐ Addition		
NAME	ROONEY, PATRICK G		3.2 NAME								
STREET ADDRESS	3408 APT 1A GREENBRIAR CT		3.3 STREE	T ADDRESS					ļ		
CITY-ST-ZIP	GULF BREEZE FL		3.4. CITY-5	ST-ZIP					}		
TITLE		☐ DELETE	4.1 TITLE	- 1				☐ Change	☐ Addition		
NAME			4.2 NAME								
STREET ADDRESS			43 STREE	TADDRESS							
CITY-ST-ZIP			4.4 CITY-S								
TITLE		☐ DELETE	5.1 TITLE					☐ Change	Addition		
NAME			5.2 NAME	-					.		
STREET ADDRESS			5.3 STREE	T ADDRESS	-						
CITY-ST-ZIP			5.4 CITY-S	T-ZIP							
TITLE		☐ DELETE	6.1 TITLE					Change	Addition		
NAME			6.2 NAME						ł		
STREET ADDRESS			6.3 STREE	TADDRESS							
CITY-ST-ZIP			6.4 CITY-S	T-ZIP							

on supplied with this filing Goes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplemental angual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an on or the receiver or trustife empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in or on an attailment with an address, with all other like empowered. 14. I hereby certify that the information supplied with indicated on this annual reports officer or director of the corporal Block 12 or Block 13 if changed

SIGNATURE:

DONALD: DA. Mª DONALD/-11-98