

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra P. Martin
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053584 (5)

1. Corporation Name

MCLAUGHLIN PROPERTIES, INC.



Principal Place of Business

Mailing Address

2950 E. OCEAN BLVD., APT., 34-4
STUART FL 34996

2950 E. OCEAN BLVD., APT., 34-4
STUART FL 34996

3. Date Incorporated or Qualified

07/12/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt., etc.

Suite, Apt., etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

9. Name and Address of Current Registered Agent

25

29

30

MCLAUGHLIN, ANGELA C
2950 E. OCEAN BLVD., APT., 34-4
STUART FL 34996

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 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 agent (not required when filing online)

Signature of Registered Agent (signature required when filing online)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DPST
MCLAUGHLIN, ANGELA C
2950 E. OCEAN BLVD., APT., 34-4
STUART FL 34996

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

V
ANTILLA, PETER
2950 E. OCEAN BLVD., APT., 34-4
STUART FL 34996

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

V
ANTILLA, ELVI
2950 E. OCEAN BLVD., APT., 34-4
STUART FL 34996

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

100001829521
-05/20/96--01050--025
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELVI Anttila 4-18-96

Daytime Phone #

CR2E034 (12/95)