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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000086903 (8)

DOCUMENT # P9000000903 (8) 1. Corporation Name MCGREGOR RESERVE REALTY, INC. Principal Place of Business 1391-4 MEADOW PARK LANE 1391-4 MEADOW PARK LANE								
FORT MYEF	RS FL 33901	FORT MYERS FL 339	3 01		3. Date Incorporated or Qualified 11/08/1995	3a. Date o	of Last Rep	port
					4. FEI Number	<u> </u>		pplied For
-n ·	ace of Business	2a. Mailing Address	alling Address		65-0629368		- 1	ot Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional
2		27			Fee Requ		equired	
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	ntribution Added to Fees		
Zip	Country	Zip	Country 30		8. This corporation has liability for		unders 1	199.032,
4]	25 29 29 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	y. Name and Address of Cur	Tent negistered Agent	81	Name	141 1101110 4-1- 11001000 41 11011			
MALT.	DAVID G		82	Stroot Add	ress (P.O. Box Number is Not Acceptal	ile)		
1391-4	MEADOW PARK LANE		62	SHOOL MOOL	1600 (F.O. BOX Hamber to Not Notepton			
FORT	MYERS FL 33901		83					
			84	City		Fi	85 Zip	Code
				L		FL_	oging its re	enistered office
familiar wii SIGNATURE	Signature, typed or printed name of registered a	igent and fice Lapphrable (%C	OTE: Rigistered Ago			DATE		
12.	OFFICERS	AND DIRECTORS	13.	T	ADDITIONS/CHANGES TO OF		1 Change	Addition
TITLE	MALT, DAVID G	L_j beccit	1,2 NAME			_	5	_
NAME STREET ADDRESS	1391-4 MEADOW PARK	LANE		T ADDRESS				
CITY-ST-ZIP	FORT MYERS FL 33901		14 CHY-					
TITLE		☐ DELETE	2 1 TITLE] Change	☐ Addition
NAME			2 2 NAME					
STREET ADDRESS				LADDRESS				
CITY - ST - ZIP		T DELCTE	2 4 C-TY -] Change	Addition
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NAME				ET ADDRESS				
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CITY - ST - ZIP TITLE		☐ DELETE	4 1 1116				Change	Addition
NAME		-	4.2 NAME					
STREET ADDRESS			4.3 STREE	1 ADDRESS				
CITY - ST - ZIP	·		4 4 CITY -	ST-ZiP				F75 4 1 122
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NAME			5.2 NAME					
STREET ADDRESS				ET ADORESS				
CITY-ST-ZIP			5 4 CITY		All gaves grown grown also were		1 (Tanne	Addition
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NAME	•		6.2 NAME		-03/25/9601	UDDTTUL	IC	
STREET ADDRESS				ET AUDRESS	***200.00			
CITY - ST - ZIP			6.4 CITY	-31-ZIP				

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify 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 the appears an address.

SIGNATURE: _

AT THE AND TYPED OR PRINTED NIME OF SIGNING OFFICER OR DIRECTOR

941-936-6724

Daytime Priorie - 25-96