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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

(3) (4)



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000090996 (6)

MCCLURE HOLDINGS, INC.

Principal Place of Business Mailing Address 530 FIFTH AVENUE DRIVE WEST 530 FIFTH AVENUE DRIVE WEST PALMETTO FL 34221 PALMETTO FL 34221 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3348341 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Ζφ 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** DURYEA, DUANE ) wane 4403 24TH AVE E 82 3400 BARNETT CENTER 83 PALMETTO FL 34221 City Palmetto 84 3422 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 abbligations of Section 607.0505, Florida Statutes. buryet **SIGNATURE** title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change DELETE TITLE 1.1 TITLE MCCLURE, DANIEL P NAME 1.2 NAME **53**0 FIFTH AVE. DRIVE WEST STREET ADDRESS 1.3 STREET ADDRESS PALMETTO FL 34221 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE MCCLURE, SCOTT L NAME 2.2 NAME **53**0 FIFTH AVE. DRIVE WEST 2.3 STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIF 2.4 CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE MCCLURE, CORRINE A NAME 3.2 NAME **530 FIFTH AVE. DRIVE WEST** STREET ADDRESS 3.3 STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 THILE TITLE MCCLURE, DANIEL C NAME 4. 2 NAME **\$30** FIFTH AVE. DRIVE WEST 4.3 STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 T(T) F TITLE SPENCER, MARY A 5.2 NAME NAME STREET ADDRESS 530 FIFTH AVE. DRIVE WEST 5.3 STREET ADDRESS PALMETTO FL 34221 5.4 City - St - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE **DURYEA, DUANE** 6.2 NAME NAME **530 FIFTH AVE. DRIVE WEST** 6.3 STREET ADDRESS STREET ADDRESS

PALMETTO FL 34221 CITY-ST-ZIP 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 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, for on an attachment with an address.

11/12/08

**FILED** 

Apr 22 1998 8:00am

Secretary of State