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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000096769 (1)

MC ROY OF SW FLORIDA, INC.

| Principal Place of Business | Mailing Address | ·· • • • • • • • • • • • • • • • • • • |
|-----------------------------|-----------------|--|
| 2010 LEEWYN DRIVE | P.O. BOX 3319 | |

FILED Feb 11 1998 8:00am Secretary of State



SARASOTA FL 34240 SARASOTA FL 34230 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0634360 Not Applicable 26 Suite, Apt. #, etc. Suito, 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 Zφ Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROGDON, MARY A 2010 LEEWYN DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34240 83 84 City Zip Code 85 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 [amiljar with, and accept the obligations of section 607.0505, Florida Statutes. NCITE. Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE BROGDON, ROY R NAME 1.2 NAME 2010 LEWYN DRIVE STREET ADORESS 1.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change ☐ Addition BROGDON, MARY NAME 2.2 NAME 2010 LEWYN DRIVE STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME BROGDON, CYNTHIA E 3.2 NAME 2010 LEWYN DRIVE STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change ☐ Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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

SIGNATURE:

941-371-3038