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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000010856 (8)

MCGUIGAN ENTERPRISES, INC.

FILED Apr 14 1998 8:00am Secretary of State

						1 1				
Principal Place of Business Mailing Address						~j	BSEMAN ANN AMAIN MAILE MRESE AMAIN	ABILL BALAL HE	111 BOLDI IBIBI BII	IA Arif Mai
18196 DEEP PASSAGE LANE 18196 DEEP PASSAGE LANE										
	BEACH FL 33931	FORT MYERS BEACH FL 33931				DO NOT WRITE IN THIS SPACE				
						9 Date	Incorporated or Qualifie		SPACE	
								u		
2. Princinal Pla	ace of Business	2a. Mailing Address				4. FEI N	31/1996 Umber			oplied For
21	204 O. 225/1000	26					0640349			ot Applicable
Suite, Apt. 4	, etc.	Suite, Apt. #, etc.								Additional
22		27				5. Certif	icate of Status Desired			equired
City & State	l	City & State			6. Electi	on Campaign Financing		\$5.00	May Be	
23		28				Fund Contribution		Added		
Zip	Country	Zip	Cou	intry		8. This c	corporation owes or has	paid the cu	urrent year Inf	angible
24	25	29	30			Perso	nal Property Tax due Ju	ne 30.	Yes [] No
	9. Name and Address of Current	Registered Agent		L.,		10. Name	e and Address of New	Registered	Agent	
€W	ISON, LARRY D			81	Name					
172	74 SAN CARLOS BLVD. STE 202	2		82	Street Addr	ess (P.O. Bo	x Number is Not Accep	table)		
FORT MYERS BEACH FL 33931				Ш				,		
				83						
				84	City				85 Zip	Code
					Oily			Fl	_ 00 240	
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the a	bove-	named corp	oration subr	nits this statement for th	e purpose o	of changing it	ts registered
agent. I ar	egistered agent, or both, in the State of familiar with, and accept the obligation	tions of, Section 607.0505, Fl	orida Sta	tutes.	the corporati	lion's board (or directors. I hereby ac-	cept the ap	pointment as	registered
SIGNATURE .										
	Signature, typed or printed hame of registered agen			d Agent	t signature require	red when reinstati		DATE		
12.	OFFICERS AND		13.			ADDIT	IONS/CHANGES TO OF	FICERS AN		
TITLE	D	L] DELETE	1.1 T		i				Change	Addition
HAME	MCGUIGAN, MICHAEL B			1.2 NAME						1
STREET ADDRESS	18196 DEEP PASSAGE LANE			1.3 STREET ADDRESS						
CITY-SY-ZIP	FORT MYERS BEACH FL 33931		_	1.4 CITY-ST-ZIP 2.1 TITLE					Change	[] #ddition
TITLE		FT DECESE							C) Chailbe	Addition
NAME				2.2 NAME						ì
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HAME			3.2 N							
STREET ADDRESS					DDRESS					i
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TITLE		ו_ן טנונונ	4.1 T)				Change	L.J Addition
NAME			4.21							
STREET ADDRESS					DDRESS					
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NAME			5.2 N							
STREET ADDRESS			5.3 S	TREET A	DORESS					
CITY-ST-ZIP		TT Briete		ITY-ST	- ZIP				<u> </u>	T Talance
TITLE		☐ DELETE	6.1 Ti						☐ Change	Addition
NAME			6.2 N		j					
STREET ADDRESS					ODRESS					ļ
CITY-ST-ZIP				ITY-ST		084-5	07/0V/V FI=-1 \ 0:	14.00	and the second	3-4
14. I hereby c	ertify that the information supplied with	in this tiling does not quality t	or the ex	empti d that	on stated in	Section 119	.07(3)(i), Florida Statutes	s. I turther C	certify that the	e information

indicated on this annual report is supplemental artiflat report is true and accurate and that my signature shall have the same legal effect as if made under oath, that if an a officer or director of the corporation or the receiver or trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, orion an extachment with an oddress.

SIGNATURE: