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May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000075281 (1)

1. Corporation Name

MACKENZIE TECHNICAL SERVICES, INC.

Principal Place of Business

721 31ST STREET NORTHWEST
NAPLES FL 34120-1713

Mailing Address

721 31ST STREET NORTHWEST
NAPLES FL 34120-1713



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/10/1996

4. FEI Number

59-3398595

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 6301 SHIRLEY ST, Suite 4

Suite, Apt., etc.

22 Suite 4

City & State

23 Naples FL

Zip

24 34109-6246

Country

25 USA

2a. Mailing Address

26 6301 SHIRLEY ST, Suite 4

Suite, Apt., etc.

27 Suite 4

City & State

28 Naples FL

Zip

29 34109-6246

Country

30 USA

9. Name and Address of Current Registered Agent

MACKENZIE, BRIAN
721 31ST ST NE
NAPLES FL 34120

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 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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

Brian H. Mackenzie, President / Brian H. Mackenzie

4/29/98

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PSTD
MACKENZIE, BRIAN
STREET ADDRESS 721 31ST STREET NORTHWEST
CITY-ST-ZIP NAPLES FL 34120-1713

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME PSTD
MACKENZIE, BRIAN H
1.3 STREET ADDRESS 6301 SHIRLEY ST, Suite 4
1.4 CITY-ST-ZIP NAPLES, FL 34109-6246

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brian H. Mackenzie, President

4/29/98

941-544-3697

CR2E034 (10/97)