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FILED
Feb 06 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 # P97000002375 (8)

1. Corporation Name

D&F MACOMBER INC.



Principal Place of Business

3804 NW 84TH AVENUE
CORAL SPRINGS FL 33065

Mailing Address

3804 NW 84TH AVENUE
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1997

4. FEI Number

65-0722155

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 10181 W. SAMPLE RD

Suite, Apt. #, etc.

22 4

City & State

23 CORAL SPRINGS, FL

Zip

24 33065

Country

25 US

2a. Mailing Address

26 10181 W SAMPLE RD

Suite, Apt. #, etc.

27 4

City & State

28 CORAL SPRINGS, FL

Zip

29 33065

Country

30 US

9. Name and Address of Current Registered Agent

MACOMBER, DONALD K
3804 NW 84TH AVENUE
CORAL SPRINGS FL 33065

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 607.0502 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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
MACOMBER, DONALD K
STREET ADDRESS
3804 NW 84TH AVENUE
CITY-ST-ZIP
CORAL SPRINGS FL 33065

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

11 TITLE ☐ Change ☐ Addition

12 NAME
MACOMBER, DONALD K.
13 STREET ADDRESS
3804 NW 84 AVE
14 CITY-ST-ZIP
CORAL SPRINGS, FL 33065

21 TITLE ☐ Change ☒ Addition

22 NAME
M. FRANCES MACOMBER
23 STREET ADDRESS
3804 NW 84 AVE
24 CITY-ST-ZIP
CORAL SPRINGS, FL 33065

31 TITLE ☐ Change ☒ Addition

32 NAME
MARY F. MACOMBER
33 STREET ADDRESS
3804 NW 84 AVE
34 CITY-ST-ZIP
CORAL SPRINGS, FL 33065

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 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.

CR2E034 (10/97)