

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000009308

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: MC MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

231 S FLORIDA AVENUE
LAKELAND, FL 33801 US

New Principal Place of Business:

202 N. MASSACHUSETTS AVE.
LAKELAND, FL 33801 US

Current Mailing Address:

231 S FLORIDA AVENUE
LAKELAND, FL 33801 US

New Mailing Address:

PO BOX 2
LAKELAND, FL 338020002 US

FEI Number: 59-3434053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPARETTO, TANYA M
200 LAKE MORTON DR, SUITE 100
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CLEGHORN, ROBERT
Address: 231 S FLORIDA AVENUE
City-St-Zip: LAKELAND, FL 33801

Title: D () Delete
Name: MILES, JEFFREY S
Address: 231 S FLORIDA AVENUE
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CLEGHORN, ROBERT
Address: PO BOX 2
City-St-Zip: LAKELAND, FL 338020002

Title: D (X) Change () Addition
Name: MILES, JEFFREY S
Address: PO BOX 2
City-St-Zip: LAKELAND, FL 338020002

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT CLEGHORN

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date