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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000055239 (2)

MCCAULEY ENTERPRISES, INC.

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business 1704 NW BRITT ROAD STUART FL 34994		Mailing Address 1704 NW BRITT ROAD STUART FL 34994				BEYRU AFBOR FIRMU HOM HOOK
V. V					DO NOT WRITE IN THIS S	PACE
					 Date Incorporated or Qualified 06/23/1997 	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
21		26	 			Not Applicable
Suite, Apt #, etc.		Suite, Apt #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	ŀ -¬ '		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	7ip	Coun	lry	8. This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Intangible
	9. Name and Address of Currer		11		10. Name and Address of New Registered A	\gent
MCCAULEY, JEFFREY				Name		
170	4 NW BRITT ROAD JART FL 34994		1	32 Street Add	Iress (P.O. Box Number is Not Acceptable)	
O I C	7411 12 01001		į, į	33		
			ļ.	N 02		las I Zin Code
				B4 City	FL	85 Zip Code
11. Pursuant t	o the provisions of Sections 607 050	2 and 607.1508, Florida Statu	tes, the abo	ove-named cor	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	changing its registered
agent. I ar	n familiar with, and accept the oblig	alions of Section 607.0505, F	lorida Statu	les.	mons board of directors. Thereby accept the app	oliniment as registered
SIGNATURE	_ XPX/ MI	and			47/4/9	8
	Signature / shift of purcey of the of the stored agr	en ano tipe il neglicable (NO D DTRECTORS	11 Registered	Agent's gnature requ	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D OFFICE HS AND	DELETE	1.1 1tit	F T	ADDITIONS/CHANGES TO OFFICEAS AND	Change Addition
NAME	AAOOALB EV. IPPEDEV		1.2 NAA			
STREET ADDRESS	1704 NW BRITT ROAD			EET ADDRESS		
CITY-ST-ZIP	STUART FL 34994			(-ST-ZIP		
TITLE		DELETE	2.1 TITL			Change Addition
NAME			2.2 NAN	AE		
STREET ADDRESS			2.3 STR	EET ADDRESS		
CITY-ST-ZIP			2. 4 CH	Y - ST - ZIP		
TETLE		DELETE	3.1 TITL	E		☐ Change ☐ Addition
NAME			3.2 NAM	AE		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		3.4. CIT	Y-ST-ZIP		
TITLE		☐ DELETE	4.1 THTL	E		Change
NAME			4. 2 NAJ	ME		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP				r - ST - ZIP		
TITLE		☐ DELETE	5.1 TITL			Change Addition
NAME			5.2 NAN			
STREET ADDRESS				EE1 ADDRESS		
CITY-ST-ZIP		Nei ter		r-ST-ZIP		Change Addits
TITLE		DELETE	6.1 TITL			Change Addition
NAME			6.2 NAN			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			6.4 CITY	r-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.

4/14/00