

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jun 09, 1999 8:00 am  
Secretary of State

06-09-1999 90017 022 \*\*\*550.00

DOCUMENT # P97000102903

1. Corporation Name

C.S. MCCUBBIN, & CO.

Principal Place of Business  
3116 N FEDERAL HWY. STE 276  
LIGHTHOUSE POINT FL 33064

Mailing Address  
3116 N FEDERAL HWY. STE 276  
LIGHTHOUSE POINT FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/05/1997

4. FEI Number

65-0798238

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 the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 3529 DUNES VISTA DRIVE

2a. Mailing Address

26 3529 DUNES VISTA DR

Suite, Apt. #, etc.

22 1

Suite, Apt. #, etc.

27

City & State

23 Pompano Beach FL

City & State

28 Pompano Beach FL

Zip

24 33069

Country

25 USA

Zip

29 33069

Country

30 USA

9. Name and Address of Current Registered Agent

MCCUBBIN, CHARLES S JR.  
3116 N FEDERAL HWY, STE 276  
LIGHTHOUSE POINT FL 33064

10. Name and Address of New Registered Agent

81 Name

CHARLES S. MCCUBBIN JR

82 Street Address (P.O. Box Number is Not Acceptable)

3529 DUNES VISTA DRIVE

83

84 City

Pompano Beach

FL

85 Zip Code  
33069

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 PS ☐ DELETE

NAME MCCUBBIN, CHARLES S JR  
STREET ADDRESS 3116 N FEDERAL HWY SUITE 276  
CITY-ST-ZIP LIGHTHOUSE PT FL 33064

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 PRESIDENT ☒ Change ☐ Addition

1.2 NAME CHARLES S. MCCUBBIN, JR

1.3 STREET ADDRESS 3529 DUNES VISTA DRIVE

1.4 CITY-ST-ZIP Pompano Beach, FL 33069

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/99

Date

800 314 5582

Daytime Phone #

CR2E034 (1/98)