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

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PROFIT CORPORATION ANNUAL REPORT

~~1999~~ 2000

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

FILED
00 APR 24 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

DOCUMENT # P98000033422

Corporation Name
MAYWOOD, INC.

Principal Place of Business
LAKE ISIS AVE.
PARK FL 33825

Mailing Address
709 LAKE ISIS AVE.
AVON PARK FL 33825

DO NOT WRITE IN THIS SPACE

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip [25] Country

2a. Mailing Address
[26]
Suite, Apt. #, etc. [27]
City & State [28]
Zip [29] Country [30]

3. Date Incorporated or Qualified
04/10/1998

4. FEI Number
65-0851349
☐ 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

9. Name and Address of Current Registered Agent
MAY, PHILLIP B
709 LAKE ISIS AVE.
AVON PARK FL 33825

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
100003239211--9
83 -05/04/00--01022--018
****150.00 ****150.00
84 City FL 85 Zip Code

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.

Phillip B. May
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

JANUARY 4, 1999
DATE

OFFICERS AND DIRECTORS

☐ DELETE
TITLE
ADDRESS
ST-ZIP

☐ DELETE
TITLE
ADDRESS
ST-ZIP

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TITLE
ADDRESS
ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☐ Change	☒ Addition
1.2 NAME	PHILLIP B. MAY		
1.3 STREET ADDRESS	709 LAKE ISIS AVE		
1.4 CITY-ST-ZIP	AVON PARK, FL 33825		
2.1 TITLE	VICE PRESIDENT	☐ Change	☒ Addition
2.2 NAME	ROBERT M. PHILLIPS		
2.3 STREET ADDRESS	17011 TARPON WAY RD.		
2.4 CITY-ST-ZIP	N. FORT MYERS, FL 33917		
3.1 TITLE	SECRETARY/TREASURER	☐ Change	☒ Addition
3.2 NAME	WOODFORD W. MAY		
3.3 STREET ADDRESS	1901 PASSAIC AVE		
3.4 CITY-ST-ZIP	FORT MYERS, FL 33901		
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	4/20/2000		

SP

CR2E034 (11/98)

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: Phillip B. May PHILLIP B. MAY 1/4/99 941-453-4029