

2004 FOR PROFIT CORPORATION ANNUAL REPORT

08-20-2004 90001 023 ***150.00
P98000034229

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA 34069028



DOCUMENT # P98000034229																													
1. Entity Name MCLEOD REALTY, INC.																													
Principal Place of Business %EDWARD GETTENMACHER, ESQ. 2600 DOUGLAS RD. PH-8 CORAL GABLES, FL 33134			Mailing Address %EDWARD GETTENMACHER, ESQ. 2600 DOUGLAS RD. PH-8 CORAL GABLES, FL 33134																										
2. Principal Place of Business			3. Mailing Address																										
Suite, Apt. #, etc.			Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country	Zip		Country																								
4. FEI Number 65-0828569			Applied For Not Applicable																										
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required																										
6. Name and Address of Current Registered Agent CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST. STE. 1 TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name: <u>Edward P. Guttenmacher</u> Street Address (P.O. Box Number is Not Acceptable): <u>2600 Douglas Rd PH-8</u> City: <u>Coral Gables</u> FL Zip Code: <u>33134</u>																										
8. 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. I am familiar with, and accept the obligations of registered agent.																													
SIGNATURE: <u>[Signature]</u> DATE: <u>10/19/04</u> (NOTE: Registered Agent signature required when reinstating)																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																										
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12. I hereby certify that the information supplied with this filing does not apply 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 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 10 or Block 11 if changed, or on an attachment with an address, with a new office or director.																													
SIGNATURE: <u>[Signature]</u> DATE: <u>10/22/04</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>Edward P. Guttenmacher</u>																													