FILE	NOW: FILING FEE	AFTER MAY 1ST IS	\$550.0	0	APPROVED (L	
COF	PROFIT CORPORATION ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State Division OF Corporations			99 AUG 26 AM ID: 13		
DOCUMENT # P98000072030				SECRETARY OF STATE TAULAHASSEE, FLORIDA		
MPC BUILDING OF LAKE PLACID, INC. Principal Place of Business Mailing Address 481 ROOSEVELT AVENUE NORTHEAST LAKE PLACID FL 33852 LAKE PLACID FL 33852				4130199 90120 008 \$ 150.0		
Principal Place of Business					3. Date incorporated or Qualified 06/18/1998 4. FEI Number 9 3444 9 Applied For	
26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27					8. Certificate of Status Desired	
City & State City & State 23 28					6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25 9. Name and Address of Curr		Country	·	8. This corporation owes the current year Intangible Personal Property Tax.	
CHAPMAN, PEGGY 481 ROOSEVELT AVENUE NORTHEAST LAKE PLACID FL 33852			81 82	81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		
			83 84	City	FL 85 Zip Code	
	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obliging the section of the sectio	502 and 607.1508, Florida Statutes te of Florida. Such change was aut gations of, Section 607.0505, Florid	the above horized by the Statutes	e-named corporate	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered as	gent and little if applicable (NOTE R	legistered Age:	il signature requir	red when reinstating) DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	□ DELETE	1.1 TITLE		☐ Change ☐ Add+to	
NAME	CHAPMAN, MICHAEL P	00TH 15407	1.2 NAME			
STREET ADDRESS	481 ROOSEVELT AVENUE N LAKE PLACID FL 33852	UKINEASI		ADDRESS		
CITY-ST-ZIP TITLE	D	☐ DELETE	1.4 CITY-S 2.1 TITLE	1-ZIP	☐ Change ☐ Additio	
NAME	CHAPMAN, PEGGY		22 NAME			
STREET ADDRESS			ľ	ADDRESS		
City-ST-ZIP	LAVE DI LOD EL CARE		2.4 CITY-8	- 1		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addiso	
NAME			32 NAME			
STREET ADDRESS			3.3 STREE	ADDRESS		
CITY-ST-ZIP			3.4. CITY-8	T-ZIP		
TITLE		☐ DELETE	4.1 TITLE	{	☐ Change ☐ Adoito	
NAME			4.2 NAME	ļ		
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	7-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 of the organization of the organization of the receiver of the organization of the organization of the receiver of the organization of the organizati 6.4 CITY- ST-ZIP

51 TITLE

6.2 NAME

61 TITLE

62 NAME

5.3 STREET ADDRESS

4.3 STREET ADDRESS

64 CITY-8T-ZIP

DELETE

DELETE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

GU1-465-9185

Change

Change

Addition



MPC Building of Lake Placid, Inc. 481 Roosevelt Ave. NE

48I Roosevelt Ave. NE Lake Placid, FL 33852 CBC 05I 254 (94I) 465-9185 Fax (94I) 465-5827

August 14, 1999

Florida Department of State Division of Corporations PO Box 6237 Tallahassee, FL 32314

Dear Sirs:

I have received a 2nd notice form for the 1999 Profit Corporation Annual Report Packet - Document #P98000072030.

However, I sent the information and check on April 27, 1999. The check was cleared for \$150. Please find enclosed a copy of this filing.

Please let me know as soon as possible if this has not been successfully filed.

Thank you

Sincerely

Peggy Chapman

Enclosure