

2000 UNIFORM BUSINESS REPORT (UBR)

4/4/17

DOCUMENT # P99000059994

1. Entity Name

MAC TOWERS, INC.

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FILED
Jun 19, 2000 8:00 am
Secretary of State

04-17-2000 90130 022 ***150.00

Principal Place of Business
133 W. INDUSTRIAL BLVD.
PENSACOLA FL 32505

Mailing Address
133 W. INDUSTRIAL BLVD.
PENSACOLA FL 32505-2201

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

59-3586979

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHIBBS, SUZANNA N
421 N. PALAFOX ST.
PENSACOLA FL 32501

Name

Street Address (P.O. Box Number Is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when resigning)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

President
Bobby McCrory
P.O. Box 11095
Pensacola, FL 32524

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Treasurer
Bobby McCrory
P.O. Box 11095
Pensacola, FL 32524

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V. President
Patricia K. McCrory
P.O. Box 11095
Pensacola, FL 32524

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Secretary
Patricia K. McCrory
P.O. Box 11095
Pensacola, FL 32524

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patricia K. McCrory
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR

4/4/17

850-478-3721
Date Daytime Phone

CP2ED34 (9/99)