## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P99000072894

Entity Name: MACMAR, INC.

FILED Jun 01, 2005 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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CHARLIES BAR & GRILL
15200 S US 41, 112-114
FORT MYERS, FL 33908

CHARLIES BAR & GRILL
1504 SE 14TH ST
CAPE CORAL, FL 33990

Current Mailing Address: New Mailing Address:

CHARLIES BAR & GRILL
15200 S US 41, 112-114
FORT MYERS, FL 33908

CHARLIES BAR & GRILL
1504 SE 14TH ST
CAPE CORAL, FL 33990

FEI Number: 65-0950923 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLINE, CARLS

1721 S.E. 40TH STREET

CAPE CORAL, FL 33904 US

MILLIKAN, MARTA G

1721 S.E. 40TH STREET

CAPE CORAL, FL 33904 US

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: MARTA G MILLIKAN 06/01/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change ( ) Addition MILLIKAN, MARTHA G MILLIKAN, MARTA G Name: Name: 1721 S.E. 40TH STREET 1721 S.E. 40TH STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904 US

itle: ( ) Delete Title: VP ( ) Change (X) Ac

 Title:
 ( ) Delete
 Title:
 VP ( ) Change (X) Addition

 Name:
 Name:
 MILLIKAN, CHARLES R

 Address:
 Address:
 1721 SE 40TH ST

City-St-Zip: CAPE CORAL, FL 33904 US

Title: ( ) Delete Title: TRES ( ) Change (X) Addition

 Name:
 Name:
 NOE, GINA M

 Address:
 Address:
 1721 SE 40TH ST

City-St-Zip: CAPE CORAL, FL 33904 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTA G MILLIKAN PRES 06/01/2005