

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90184 012 ***150.00

DOCUMENT # S55476

1. Corporation Name

MC GARRY PROPERTIES MANAGEMENT, INC.

Principal Place of Business

220 HIBISCUS ST
JUPITER FL 33458
US

Mailing Address

220 HIBISCUS ST
JUPITER FL 33458
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1991

4. FEI Number

65-0263428

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

7. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 7190 SE FEDERAL HWY 1

Suite, Apt. #, etc.

22 SUITE # 4

City & State

23 STUART F

Zip

24 34997

Country

25 MARTIN

2a. Mailing Address

26 5375 SE SERENOA TER

Suite, Apt. #, etc.

27

City & State

28 HOBE SOUND FL

Zip

29 34455

Country

30 MARTIN

9. Name and Address of Current Registered Agent

MC GARRY, STEPHEN
220 HIBISCUS ST
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name MCGARRY, STEPHEN

82 Street Address (P.O. Box Number is Not Acceptable)
5375 SE SERENOA TER

83

84 City HOBE SOUND

FL

85 Zip Code 33455

11. 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.

SIGNATURE

Stephen McGarry

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-99

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME MC GARRY, STEPHEN
STREET ADDRESS 24 N. LOXAHATCHEE DR.
CITY-ST-ZIP JUPITER FL

TITLE P ☒ DELETE
NAME MCGARRY-KEIRSTEAD JOANN
STREET ADDRESS 5375 SE SERENOA TERRACE
CITY-ST-ZIP HOBE SOUND FL

TITLE D ☐ DELETE
NAME MCGARRY STEPHEN
STREET ADDRESS 5375 SE SERENOA TER
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE P ☐ DELETE
NAME MCGARRY, JOANN
STREET ADDRESS 5375 SE SERENOA TER
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

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 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:

Stephen McGarry

4-28-99

Date

Daytime Phone #

CR2E034 (11/98)

0351258