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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortenson Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V36012 (5) CORPORATION NAME MCLAUGHLIN ENTERPRISES, INC.

Principal Place of Business: HALF MOON WALK, 29 FL 33940. Mailing Address: 2640 HALF MOON WALK PENTHOUSE 1, NAPLES FL 34102-7700 US

5. Date incorporated or Qualified: 05/14/1992. 6a. Date of Last Report: 4/30/1997. 4. FEI Number: 05-0362333. 5. Certificate of Status Desired: [ ] \$8.75 Additional Fee Required. 6. Election Campaign Financing Trust Fund Contribution: [ ] \$5.00 May Be Added to Fees. 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [x] yes [ ] No.

Principal Place of Business: 2640 HALF MOON WALK, Suite, Apt. #, etc. NAPLES, FL. City & State: NAPLES, FL. Zip: 34102. Country: USA.

O'NEILL, WILLIAM R. C/O CUMMINGS & LOCKWOOD 3001 TAMMAM TRAIL NORTH NAPLES FL 33940

18. Name and Address of New Registered Agent. 81 Name, 82 Street Address, 83, 84 City, FL 85 Zip Code.

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: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include James L. McLaughlin and Catherine M. McLaughlin with their titles, names, and addresses.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(k), 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; and that I am authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable. SIGNATURE: J. L. MCLAUGHLIN 5/1/98 (94) 594-1300