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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V39073

(4)

G.A. MACDONALD, INC.

Principal Place of Business

Mailing Address

FILED May 18 1998 8:00am Secretary of State



229 PENSACOLA ROAD 229 PENSACOLA ROAD VENICE FL 34285 VENICE FL 34285 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 425 South Maya Palm Drive Not Applicable 21 425 South Maya Palm Drive 65-0337327 Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Boca Raton, Florida 28Boca Raton, <u>Florida</u> Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 33432 25 USA 2933432 9. Name and Address of Current Registered Agent Personal Property Tax due June 30. USA 10. Name and Address of New Registered Agent TRACY, DENNIS J. ESQ. Geoffrey A. MacDonald Street Address (P.O. Box Number is Not Acceptable) 229 PENSACOLA ROAD VENICE FL 34285 425 South Maya Palm Drive 84 Zip Code Boca Raton, Florida 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

Stratus, typed or product requirement your analysis and the proposal segment of the production of the productio J. Patrick Dowdall as Attorney-in-fact for Geoffrey A. MacDomal (NO!) Registered Agent argnature required when reinstating) 12. OFFICERS AND DIRECTORS 13. XX Change DELETE Addition TITLE 1.1 HITLE MACDONALD, GEOFFREY A. NAME 1.2 NAME MacDonald, Geoffrev A. 96 N. WASHINGTON STREET STREET ADDRESS 1.3 STREET ADORESS 153 E. Palmetto Place Road #207 **BOSTON MA 02114** CITY-ST-ZIP 1.4 CITY-ST-ZIP Boca Raton, Florida 33432 DELETE Change ___ Addition TITI F 21 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP City-St-Zie DELETE __ Addition TITLE 3.1 TITLE Change 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAM6 STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CI1Y - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAMI **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP

14. Thereby 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.