

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY 12 AM 9:21

DOCUMENT # V44903

(5)

1. Corporation Name

ANDREW E. MCCAW & ASSOCIATES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**280 W CANTON AVE
SUITE 102
WINTER PARK FL 32789
US**

Mailing Address

**280 W CANTON AVE
SUITE 102
WINTER PARK FL 32789
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/19/1992

3a. Date of Last Report

01/19/1994

4. FEI Number

59-3128584

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 222 W. COMSTOCK AVE

2a. Mailing Address

26 222 W. COMSTOCK AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 214

27 Suite 214

City & State

City & State

23 Winter Park Fla

28 Winter Park Fla

Zip

Country

Zip

Country

24 32789

25 ORANGE

29 32789

30 ORANGE

9. Name and Address of Current Registered Agent

**MCCAW, ANDREW E.
280 W CANTON AVE
SUITE 102
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

**81 Name MCCAW, ANDREW E.
82 Street Address (P.O. Box Number is Not Acceptable) 222 W. COMSTOCK AVE
83 Suite 214
84 City Winter Park FL 85 Zip Code 32789**

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

Signature, typed or printed name of registered agent and the 4 applicable:

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCCAW, ANDREW E.
STREET ADDRESS	280 W CANTON AVE
CITY - ST - ZIP	WINTER PARK FL
TITLE	D
NAME	MCCAW, ANDREW F
STREET ADDRESS	280 W CANTON AVE
CITY - ST - ZIP	WINTER PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D	☒ Change ☐ Addition
12 NAME	MCCAW, ANDREW E. JR.	
13 STREET ADDRESS	222 W COMSTOCK AVE	
14 CITY - ST - ZIP	WINTER PARK FL	
21 TITLE	MCCAW, ANDREW E. JR.	☒ Change ☐ Addition
22 NAME	MCCAW, ANDREW E. JR.	
23 STREET ADDRESS	222 W. COMSTOCK AVE	
24 CITY - ST - ZIP	WINTER PARK FL 32789	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

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***225.00 ***225.00**

5/12/95 MS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BORING OFFICER OR DIRECTOR

my 9

407 644 2275