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 APR 25 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V62973** **(5)**

1. Corporation Name
MACUNLIMITED, INC.

Principal Place of Business	Mailing Address
900 E. SEMORAN BLVD. SUITE 38 CASSELBERRY FL 32707 US	242 WILSHIRE BLVD SUITE 38 CASSELBERRY FL 32707 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/08/1992
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business
21 242 WILSHIRE BLVD.
Suite, Apt. #, etc. 22 —
City & State 23 CASSELBERRY, FL
Zip 24 32707-5371 Country 25 USA

2a. Mailing Address
26 242 WILSHIRE BLVD.
Suite, Apt. #, etc. 27 —
City & State 28 CASSELBERRY, FL
Zip 29 32707-5371 Country 30 USA

4. FEI Number: 59-3143820 ☐ Applied For ☐ Not Applicable

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 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LAUTERETTE, NORMAN
2005 KING ARTHUR CIRCLE
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name: RUSS RUSSELL
82 Street Address (P.O. Box Number is Not Acceptable): 1100 S. DELANEY AVENUE, #F100
83
84 City: ORLANDO FL 85 Zip Code: 32806-1243

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: /Russ Russell — RUSS RUSSELL — 4/19/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	1.1 TITLE	P/T	☒ Change ☐ Addition
NAME	LAUTERETTE, JEFF R	1.2 NAME	RUSS RUSSELL	
STREET ADDRESS	9085 GOLDEN SUNSET LANE	1.3 STREET ADDRESS	1100 S. DELANEY AVENUE, #F100	
CITY-ST-ZIP	SPRINGFIELD VA	1.4 CITY-ST-ZIP	ORLANDO, FL 32806-1243	
TITLE	VPS	2.1 TITLE	V	☒ Change ☐ Addition
NAME	LAUTERETTE, MARK C	2.2 NAME	JEFF R. LAUTERETTE	
STREET ADDRESS	9085 GOLDEN SUNSET LANE	2.3 STREET ADDRESS	2615F HYDRAULIC ROAD	
CITY-ST-ZIP	SPRINGFIELD VA	2.4 CITY-ST-ZIP	CHARLOTTESVILLE, VA 22901	
TITLE	VPM	3.1 TITLE	V/S	☒ Change ☒ Addition
NAME	LAUTERRETTE	3.2 NAME	MARGARET MARY RUSSELL	
STREET ADDRESS	2005 KING ARTHUR CR.	3.3 STREET ADDRESS	1100 S. DELANEY AVENUE, #F100	
CITY-ST-ZIP	MAITLAND FL	3.4 CITY-ST-ZIP	ORLANDO, FL 32806-1243	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 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.

SIGNATURE: /Russ Russell — RUSS RUSSELL — 4/19/95 — 407-767-0773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0097000 CP