2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710419

FILED Apr 13, 2006 Secretary of State

Entity Name: MACDONALD TRAINING CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

5420 W. CYPRESS ST TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

5420 W. CYPRESS ST TAMPA, FL 33607

FEI Number: 59-0777827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TROCKE, MICHAEL T TULLO, ANDREA T

101 E.KENNEDY BLVD 4301 ANCHOR PLAZA PARKWAY

SUITE 2500 SUITE 300 TAMPA, FL 33634 US TAMPA, FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANDREA T. TULLO 04/13/2006

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

() Delete () Change () Addition

FREYVOGEL, JAMES M Name: Name: 5420 W. CYPRESS ST Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

Title: () Delete Title: () Change () Addition

ROOP, ELIZABETH S Name: Name: Address: 107 N. 11TH STREET STE 2 Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: VC. () Delete Title: (X) Change () Addition DIAZ, RICHARD Name: DIAZ, RICHARD Name:

1200 W. PLATT STREET STE 204 1200 W. PLATT STREET STE 204 Address: Address:

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

Title: () Delete Title: (X) Change () Addition Name: HENGEL, STEVE Name: QUAM, DARRIN

5321 SOUTHWICK DRIVE 401 E. JACKSON STREET STE 2200 Address: Address:

TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33624 City-St-Zip:

Title: VC () Delete Title: (X) Change () Addition

SPEARS, PATRICIA SPEARS, PATRICIA Name: Name:

2413 BAYSHORE BLVD, #1504 2413 BAYSHORE BLVD, #1504 Address: Address:

City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES M. FREYVOGEL Ρ 04/13/2006