2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# 164625

Entity Name: MUNICIPAL CODE CORPORATION

Current Principal Place of Business:

P.O. BOX 2235
TALLAHASSEE, FL 32316

New Principal Place of Business:

1700 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310

Current Mailing Address:

P.O. BOX 2235
TALLAHASSEE, FL 32316

New Mailing Address:

FEI Number: 59-0649026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANGFORD, A. LAWTON
1700 CAPITAL CIRCLE, SW
TALLAHASSEE, FL 32310 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: COB ( ) Delete
Name: LANGFORD, GEORGE R
Address: 1700 CAPITAL CIR SW
City-St-Zip: TALLAHASSEE, FL 32310

Title: EVP ( ) Delete
Name: GRANT, HAROLD E
Address: 1700 CAPITAL CIR SW
City-St-Zip: TALLAHASSEE, FL 32310

Title: V ( ) Delete
Name: BARSTOW, DALE
Address: 1700 CAPITAL CIR SW
City-St-Zip: TALLAHASSEE, FL 32310

Title: PD ( ) Delete
Name: LANGFORD, LAWTON,
Address: 1700 CAPITAL CIR SW
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE S. EAGEN, CFO CFO 04/30/2007
Electronic Signature of Signing Officer or Director Date