

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 294200

Entity Name: FRED MCGILVRAY, INC.

FILED
Jun 28, 2007
Secretary of State

Current Principal Place of Business:

8690 N W 58TH ST
MIAMI, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 522204
MIAMI, FL 33152 US

New Mailing Address:

FEI Number: 59-1097179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCGILVRAY, MICHAEL O
8690 N.W. 58 STREET
MIAMI, FL 33166 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: TS () Delete
Name: MCGILVRAY, TIMOTHY L,
Address: 7460 S.W 127 STREET
City-St-Zip: MIAMI, FL 33156

Title: CD () Delete
Name: MCGILVRAY, FRED,
Address: 6000 S W 128TH ST
City-St-Zip: MIAMI, FL 33156

Title: PD () Delete
Name: MCGILVRAY, MICHAEL O, .
Address: 6050 SW 128TH STREET
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: PATTI, NORMAN E.,
Address: 7431 S.W. 131 AVE.
City-St-Zip: MIAMI, FL 33183

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: MICHAEL O. MCGILVRAY

PD

06/28/2007

Electronic Signature of Signing Officer or Director

_____ Date