

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 460217

FILED  
Feb 06, 2007  
Secretary of State

Entity Name: MGT OF AMERICA, INC.

## Current Principal Place of Business:

2123 CENTRE POINTE BLVD  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

2123 CENTRE POINTE BLVD  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 59-1576733      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JUAREZ, MICHELLE  
2123 CTR POINTE BLVD  
TALLAHASSEE, FL 323084930 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: D ( ) Delete  
Name: CARUTHERS, KENT  
Address: 4044 BRANDON HILL DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: P ( ) Delete  
Name: PORRER, FRED  
Address: 4042 BLAIRSTONE RD  
City-St-Zip: TALLAHASSEE, FL 32311

Title: T ( ) Delete  
Name: JUAREZ, MICHELLE  
Address: 1880 CHARDONNAY PL  
City-St-Zip: TALLAHASSEE, FL 32311

Title: D ( ) Delete  
Name: BOTWELL, W.K. JR  
Address: 3431 CEDAR LN  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S ( ) Delete  
Name: HUNBLE, ED  
Address: 10948 KNIGHT CT SE  
City-St-Zip: OLYMPIA, WA 98501

Title: D ( ) Delete  
Name: MCGINNIS, KEN  
Address: 5928 BLYTHEFIELD DR  
City-St-Zip: EAST LANSING, MI 48823

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: FORRER, FRED  
Address: 4042 BLAIRSTONE RD  
City-St-Zip: TALLAHASSEE, FL 32311

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 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 JUAREZ

T

02/06/2007

Electronic Signature of Signing Officer or Director

Date