

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 475387

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: MCMUNN COMPANY, INC.

**Current Principal Place of Business:**

12035 PILOT COUNTRY DR  
SPRING HILL, FL 34610

**New Principal Place of Business:**

**Current Mailing Address:**

12035 PILOT COUNTRY DR  
SPRING HILL, FL 34610

**New Mailing Address:**

FEI Number: 59-1610518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GARRABRANTS, E L, JR  
6008 MAIN STREET  
NEW PORT RICHEY, FL 34653 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: PD ( ) Delete  
Name: MCMUNN, PATRICK J,  
Address: 12035 PILOT COUNTRY DR  
City-St-Zip: SPRING HILL, FL 34610

Title: ST ( ) Delete  
Name: MCMUNN, PERTHELLA,  
Address: 12035 PILOT COUNTRY DR.  
City-St-Zip: SPRING HILL, FL 34610

Title: V ( ) Delete  
Name: MCMUNN, PATRICK J JR  
Address: 4523 HOFFMAN AVE  
City-St-Zip: SPRING HILL, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: V (X) Change ( ) Addition  
Name: MCMUNN, PATRICK J JR  
Address: 13701 CENTRALIA RD.  
City-St-Zip: BROOKSVILLE, FL 34614

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: PERTHELLA MCMUNN

ST

04/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date