2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000905

Entity Name: METRO MECHANICAL, INC.

FILED Jan 13, 2009 Secretary of State

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

1835 INDUSTRIAL DRIVE 1385 INDUSTRIAL DRIVE BOLTON, MS 39041 BOLTON, MS 39041

Current Mailing Address: New Mailing Address:

P.O. BOX 368
BOLTON, MS 39041
P O BOX 368
BOLTON, MS 39041
BOLTON, MS 39041

FEI Number: 64-0839417 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:

SHIFLETT, BRET
717 RIDGE RD
PENSACOLA, FL 32514 US
SHIFLETT, BRET
2714 MONICA LANE
CANTONMENT, FL 32533 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: 01/13/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WHITE, FRANK B
 Name:
 WHITE, FRANK B

 Address:
 121 PINEVIEW DR
 Address:
 121 PINEVIEW DR

 City-St-Zip:
 RAYMOND, MS 39154
 City-St-Zip:
 RAYMOND, MS 39041

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 WHITE, RICHARD T
 Name:
 WHITE, RICHARD T

 Address:
 130 PINEVIEW DRIVE
 Address:
 130 PINEVIEW DRIVE

 City-St-Zip:
 RAYMOND, MS 39154
 City-St-Zip:
 RAYMOND, MS 39041

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

 Name:
 WHITE, DONNA G
 Name:
 WHITE, DONNA G

 Address:
 121 PINEVIEW DR
 Address:
 121 PINEVIEW DR

 City-St-Zip:
 RAYMOND, MS 39154
 City-St-Zip:
 RAYMOND, MS 39041

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: FRANK B. WHITE P 01/13/2009