

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # F01000003532 1. Entity Name MCNEIL TECHNOLOGIES, INC.	
---	---

Principal Place of Business 6564 LOISDALE CT., STE #800 SPRINGFIELD, VA 22150	Mailing Address 6564 LOISDALE CT., STE #800 SPRINGFIELD, VA 22150
---	---



04192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-1365583	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

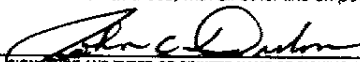
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CSD MCNEIL, JAMES L 6564 LOISDALE COURT, STE #800 SPRINGFIELD, VA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P THOMAS, RONALD 6564 LOISDALE COURT, STE #800 SPRINGFIELD, VA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HERROLD, WILLIAM 6564 LOISDALE COURT, SUITE 800 SPRINGFIELD, VA 22150
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DULAN, JOHN 6564 LOISDALE COURT, SUITE 800 SPRINGFIELD, VA 22150
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000328821
04/25/05-80093-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  4/22/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #