2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007
Secretary of State

DOCUMENT# F01000004456

Entity Name: MCHAEUSZER, INC.

Current Principal Place of Business:

P.O. BOX 470194
CELEBRATION, FL 34747

New Principal Place of Business:

130 CELEBRATION BLVD
CELEBRATION, FL 34747

Current Mailing Address:

P.O. BOX 470194
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 87-0645605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAEUSZER, DAVID
405 CAMPUS ST.
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

HAEUSZER, DAVID
130 CELEBRATION BLVD
CELEBRATION, FL 34747 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: 01/18/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CP ( ) Delete
Name: HAEUSZER, DAVID
Address: P.O. BOX 470194
City-St-Zip: CELEBRATION, FL 34747

Title: VCST ( ) Delete
Name: HAEUSZER, TERESA
Address: P.O. BOX 470194
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DAVID HAEUSZER PRES 01/18/2007
Electronic Signature of Signing Officer or Director — Date