


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # F04000005848

1. Entity Name
MHR, INC. OF ALABAMA



Principal Place of Business 13121 LILLIAN HIGHWAY PENSACOLA, FL 32506	Mailing Address 13121 LILLIAN HIGHWAY PENSACOLA, FL 32506
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03302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-1214471	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MERCHANT, HELEN H
13121 LILLIAN HIGHWAY
PENSACOLA, FL 32506

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, 2008 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	PC PHILLIPS, MARY A 2749 MANUEL DR LILLIAN, AL 36549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPVC MERCHANT, HELEN M 10287 COUNTY ROAD 95 ELBERTA, AL 36530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MESZAROS, ROBERT J II 10611 COUNTY ROAD 95 ELBERTA, AL 36530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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06/03/08-80044-019-150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Mary Phillips / Mary Phillips Date: 4/28/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day

Please Sign Here