

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006196

Entity Name: MAC III OF DELAWARE, INC.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

6584 POPLAR AVENUE, ST.E 300
MEMPHIS, TN 38138

New Principal Place of Business:

Current Mailing Address:

6584 POPLAR AVENUE, ST.E 300
MEMPHIS, TN 38138

New Mailing Address:

FEI Number: 20-1801159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PVC () Delete
Name: CARLSON, CATHY S
Address: 100 PEABODY PLACE, STE. 900
City-St-Zip: MEMPHIS, TN 38103

Title: VPSD () Delete
Name: FRENCH, MICHAEL
Address: 6584 POPLAR AVENUE, ST.E 300
City-St-Zip: MEMPHIS, TN 38138

Title: CAS () Delete
Name: GOOD, JOHN A
Address: 100 PEABODY PLACE, STE. 900
City-St-Zip: MEMPHIS, TN 38103

Title: D () Delete
Name: PEOPLES, BETH
Address: 103 FOULK ROAD, STE. 300
City-St-Zip: WILMINGTON, DE 19803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: CATHY CARLSON

O

04/21/2008

Electronic Signature of Signing Officer or Director

Date