

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002816

Entity Name: MGNMRB, INC.

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

225 MARINA DRIVE
ST. SIMONS, GA 31522

New Principal Place of Business:

Current Mailing Address:

1890 SOUTH 14TH STREET
SUITE 215
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 58-2573008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANKS, JOANA
1890 SOUTH 14TH STREET
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

BANKS, JOANA
1890 SOUTH 14TH STREET
215
FERNANDINA BEACH, FL 32034 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: JOANA BANKS

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: MCGINTY, FRED W
Address: 4021 US HIGHWAY 17
City-St-Zip: BRUNSWICK, GA 31523

Title: PRES () Delete
Name: GORDON, GREG W
Address: 322 CARNOUSTIE
City-St-Zip: ST. SIMONS ISLAND, GA 31522

Title: VP () Delete
Name: RUSSELL, RICHARD
Address: 225 MARINA DRIVE
City-St-Zip: ST. SIMONS, GA 31522

Title: SEC () Delete
Name: MALOY, MIKE
Address: 220 RICE MILL ROAD
City-St-Zip: ST. SIMONS ISLAND, GA 31522

Title: TREA () Delete
Name: NEWTON, G. PATRICK
Address: 802 EAST FIELD LANE
City-St-Zip: ST. SIMONS ISLAND, GA 31522

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:

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: FRED MCGINTY

CEO

01/12/2009

Electronic Signature of Signing Officer or Director

Date