

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002917

FILED
Mar 13, 2009
Secretary of State

Entity Name: MACDONALD CONSULTING GROUP, INC.

Current Principal Place of Business:

1100 JOHNSON FERRY ROAD
SUITE 450
ATLANTA, GA 30342

New Principal Place of Business:

Current Mailing Address:

1100 JOHNSON FERRY ROAD
SUITE 450
ATLANTA, GA 30342

New Mailing Address:

FEI Number: 58-1914443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUGELLO, MICHAEL A
12643 RACE TRACK RD
TAMPA, FL 33626 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: P () Delete
Name: MENTER, RUTH
Address: 1100 JOHNSON FERRY RD, STE 450
City-St-Zip: ATLANTA, GA 30342

Title: VP () Delete
Name: HOAD, NICHOLAS
Address: 1100 JOHNSON FERRY RD., STE 450
City-St-Zip: ATLANTA, GA 30342

Title: D () Delete
Name: AUGELLO, MICHAEL
Address: 12643 RACE TRACK RD
City-St-Zip: TAMPA, FL 33626

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:

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: MICHAEL A AUGELLO

D

03/13/2009

Electronic Signature of Signing Officer or Director

_____ Date