


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # F57326 1. Entity Name M.V. CUMMINGS ENGINEERS, INC.	
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Principal Place of Business 6501 ARLINGTON EXPRESSWAY SUITE B-211 JACKSONVILLE, FL 32211	Mailing Address 6501 ARLINGTON EXPRESSWAY SUITE B-211 JACKSONVILLE, FL 32211
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01072008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2155619	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

KELLY, WAYNE C.  
 6501 ARLINGTON EXPRESSWAY SUITE B-211  
 JACKSONVILLE, FL 32211



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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**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

02/25/08-00000836620-013 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARNEY, LARRY M. 6501 ARLINGTON EXPRESSWY JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLY, WAYNE C. 6501 ARLINGTON EXPRESSWY JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	



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: Larry M. Carney Larry M. Carney 2-15-08 904-724-0660  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #