


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F93000003011	
1. Entity Name MCKENZIE OIL COMPANY, INC.	

Principal Place of Business 222 N EUFAULA AVE. EUFAULA, AL 36027 US	Mailing Address P.O. BOX 220 EUFAULA, AL 36072-02 20
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01032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 63-0662870	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  MCKENZIE, ROBERT D 611 MAGNOLIA LANE INLET BEACH, FL 36013	<b>DO NOT WRITE IN THIS SPACE</b>
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) UD00000583839  
01/12/07-80016-019 158.75

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES MCKENZIE, DANIEL B 1771 COUNTRY CLUB RD. EUFAULA, AL 36027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCKENZIE, MARTHA W 1771 COUNTRY CLUB RD. EUFAULA, AL 36027
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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: Dan McKenzie/Pres Dan McKenzie/Pres 1-5-07 334-687-3531  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #