


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 27, 2008 8:00 am**  
**Secretary of State**

05-27-2008 90040 010 \*\*\*150.00

<b>DOCUMENT # G52374</b>	
1. Entity Name <b>FEMAC CORPORATION</b>	

Principal Place of Business <b>C/O FRANK E. MACAULEY 501 CRYSTAL DRIVE MADEIRA BCH., FL 33708</b>	Mailing Address <b>P.O. BOX 8926 MADEIRA BEACH, FL 33738-8926 US</b>
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04112008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-2311771</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>MACAULEY, FRANK E. 501 CRYSTAL DRIVE MADEIRA BCH., FL 33708</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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	STD MACAULEY, FRANK E. 501 CRYSTAL DR MADIERA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>CD</del> <del>MACAULEY, GEORGE F.</del> <del>154 MASSASOIT DR</del> <del>WARWICK, RI</del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <del>MACAULEY</del> JACOBS, CHERYL E. 501 CRYSTAL DRIVE MADEIRA BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

<b>SIGNATURE:</b> <i>Frank E. Macauley</i> <b>FRANK E. MACAULEY TRCS.</b> <b>4/24/08</b> <b>727-397-5278</b>	<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>
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