2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H28746

Title:

Name:

Address:

City-St-Zip:

FILED Apr 10, 2007 Secretary of State

Entity Name: MCGILL ENGINEERING, INC.						
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
5305 S. MACDILL AVE. TAMPA, FL 33611						
Current Mailing Address:			New Mailing Address:			
5305 S. MACDILL AVE. TAMPA, FL 33611						
FEI Number:	59-2470105	FEI Number Applied For () FE	El Number Not Applic	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
MCGILL, BRUCE A 112 BALTIC CIRCLE TAMPA, FL 33606 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:						
	Electronic	Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PST () E MCGILL, BRUCE 112 BALTIC CIRC TAMPA, FL 3360	CLE	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	D () E MCGILL, BRUCE 112 BALTIC CIRC TAMPA, FL		Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () C CRABTREE, RIC 7221 RAMOTH D JACKSONVILLE,	R	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () E STOOPS, WILLIA 3634 OVERLOOI SAINT PETERSB	C DRIVE NE	Title: Name: Address: City-St-Zip:	JOHNSON, ROB	ΓΗ KEY WAY, 9-118	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BRUCE A MCGILL PRES 04/10/2007

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BACKER, DANIEL T

3580 D MAGNOLIA RIDGE

PALM HARBOR, FL 34684

() Change () Addition