


2006 FOR PROFIT CORPORATION ANNUAL REPORT

2/27

FILED
Mar 16, 2006 8:00 am
Secretary of State

02-27-2006 90096 033 ***150.00

DOCUMENT # J06586
 1. Entity Name
MCN GROUP, INC.



Principal Place of Business Mailing Address
2500 1ST AVE N. **2500 1ST AVE N.**
ST. PETERSBURG, FL 33713-8702 US **ST. PETERSBURG, FL 33713-8702 US**

DO NOT WRITE IN THIS SPACE



02172006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-2703979 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MCNAUGHTON, JOHN A JR
1400 22ND AVE NORTH
ST. PETERSBURG, FL 33704

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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: *John McNaughton, Pres* DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MCNAUGHTON, JOHN A JR
STREET ADDRESS	1400 22ND AVE N
CITY-ST-ZIP	ST. PETERSBURG, FL 33704
TITLE	V
NAME	MCNAUGHTON, SHAWN A
STREET ADDRESS	4700 6TH AVE NORTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33713
TITLE	ST
NAME	FREED, DAWN
STREET ADDRESS	1855 RIDGEWICK DR.
CITY-ST-ZIP	WICKLIFFE, OH 44092
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: *John McNaughton, Pres* Date: 3/14/06 Daytime Phone #: 727-321-6783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT 66005526

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2006

MCN GROUP, INC.
2500 1ST AVE N.
ST. PETERSBURG, FL 33713-8702 US

Subject: MCN GROUP, INC.

Reference Number:

J06586

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION