2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# K05184

Entity Name: MC GINNIS ENTERPRISES, INC.

Current Principal Place of Business:

2120 DORIA STREET
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

26501 AIRPORT ROAD
PUNTA GORDA, FL 33982 US

Current Mailing Address:

P.O. BOX 510125
PUNTA GORDA, FL 339510125

New Mailing Address:

FEI Number: 65-0016182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCGINNIS, WALTER E.
2120 DORIA STREET
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

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:

Title: PST ( ) Delete
Name: MCGINNIS, WALTER E.,
Address: 2120 DORIA STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: MCGINNIS, WALTER E.,
Address: 2120 DORIA STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T ( ) Delete
Name: WILSON, STANLEY E.
Address: 199 FERRIS DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VP ( ) Delete
Name: MCGINNIS, PATRICK D
Address: 21471 CIRCLEWOOD AVE
City-St-Zip: PORT CHARLOTTE, FL 33952 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: W.E. MCGINNIS PST 01/12/2009
Electronic Signature of Signing Officer or Director Date