## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## Feb 22, 2006 8:00 am Secretary of State **DOCUMENT # L99788** 02-22-2006 90016 015 \*\*\*150.00 MDC SERVICES CORP. Principal Place of Business 40016000 Mailing Address C/O MAITLAND REALTY CO. C/O MAITLAND REALTY CO. P.O. BOX 940605 P.O. BOX 940605 MAITLAND, FL 32794-0605 US MAITLAND, FL 32794-0605 US 01092006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3030103 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CALHOUN, MICHAEL D. DO NOT WRITE 1352 W. LAKE COLONY DR MAITLAND, FL 32751 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 П Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE CALHOUN, MICHAEL D. NAME STREET ADDRESS 1352 W. LAKE COLONY DR CITY-ST-ZIP MAITLAND, FL 32751 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 yithen address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

407 629 9304

FILED