

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000269

FILED
Apr 30, 2007
Secretary of State

Entity Name: MEC RESOURCE CENTER, INC.

Current Principal Place of Business:

115 NE 3RD ST
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

115 NE 3RD ST
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, EULA
4699 NORTH SR 7 STE Z
TAMARAC, FL 33319 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DARBY, BARBARA
Address: 429 NW 9TH AVE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DV () Delete
Name: NELSON, EULA
Address: 3961 NW 34TH AVE
City-St-Zip: LAUDERDALE LKS, FL 33309

Title: S () Delete
Name: WILLIAMS-GREEN, VIRGINIA
Address: 1123 NW 17TH AVE.
City-St-Zip: FT LAUDERDALE, FL 33311

Title: DT () Delete
Name: COLLINS, LOIS
Address: 2800 NW 44TH ST #311
City-St-Zip: OAKLAND PARK, FL 33309

Title: D () Delete
Name: KEMP, OTIS
Address: 115 NE 3RD ST
City-St-Zip: POMPANO BCH, FL 33060

Title: D () Delete
Name: KEMP, VIVIAN E
Address: 115 NE 3RD ST
City-St-Zip: POMPANO BCH, FL 33060

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA DARBY

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date