

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37797

FILED
May 22, 2008
Secretary of State

Entity Name: MACDONALD TRAINING CENTER PROPERTIES, INC.

Current Principal Place of Business:

5420 W. CYPRESS STREET
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

5420 W. CYPRESS STREET
TAMPA, FL 33607 US

New Mailing Address:

FEI Number: 59-3010534 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KELLY, PETER J
100 SOUTH ASHLEY DRIVE
SUITE 1300
TAMPA, FL 33602 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: P () Delete
Name: FREYVOGEL, JAMES M
Address: 5420 W. CYPRESS STREET
City-St-Zip: TAMPA, FL 33607

Title: S () Delete
Name: CLARK, MADELINE
Address: 2222 NORTH TAMPA ST
City-St-Zip: TAMPA, FL 33602

Title: T () Delete
Name: DEBOSIER, KIMBERLEE
Address: 110 NORTH 11TH STREET
City-St-Zip: TAMPA, FL 33602

Title: VC () Delete
Name: PATRICIA, SPEARS
Address: 2413 BAYSHORE BLVD # 1504
City-St-Zip: TAMPA, FL 33629

Title: C () Delete
Name: FLYNN, PAUL
Address: 714 S. DELAWARE
City-St-Zip: TAMPA, FL 33606

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:

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: JAMES M. FREYVOGEL

P

05/22/2008

Electronic Signature of Signing Officer or Director

Date