

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010958

Entity Name: MCCG INVESTMENTS, INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

3389 CYPRESS GARDENS RD.
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 391
WINTER HAVEN, FL 33883

New Mailing Address:

FEI Number: 59-3625110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, VICTOR R ESQ.
255 MAGNOLIA AVE SW
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

SMITH, VICTOR R ESQ.
395 S. CENTRAL AVENUE
BARTOW,, FL 33831 US

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: VICTOR R. SMITH

01/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SUMMERS, JANICE A
Address: 3389 CYPRESS GARDENS RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: PST () Delete
Name: SUMMERS, JANICE A
Address: P O BOX 391
City-St-Zip: WINTER HAVEN, FL 33882

Title: DVP () Delete
Name: SUMMERS, MICHAEL G
Address: P O BOX 391
City-St-Zip: WINTER HAVEN, FL 33882

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: SUMMERS, JANICE A
Address: 3389 CYPRESS GARDENS RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: PSTD (X) Change () Addition
Name: SUMMERS, JANICE A
Address: P O BOX 391
City-St-Zip: WINTER HAVEN, FL 33882

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: JANICE A. SUMMERS

PDST

01/08/2009

Electronic Signature of Signing Officer or Director

Date