

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000025153

FILED
Apr 17, 2006
Secretary of State

Entity Name: MCCORQUODALE TRANSFER OF FLORIDA, INC.

Current Principal Place of Business:

107 BAILEY DRIVE
NICEVILLE, FL 32578

New Principal Place of Business:

110 WISE AVE
APT 3
NICEVILLE, FL 32578

Current Mailing Address:

PO BOX 5052
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 59-3633957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORQUODALE TRANSFER
107 BAILEY DRIVE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

MCCORQUODALE TRANSFER
110 WISE AVE
APT #3
NICEVILLE, FL 32578 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: _____

Electronic Signature of Registered Agent

04/17/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: DORSETT, WEYMAN T III
Address: 107 BAILEY DRIVE
City-St-Zip: NICEVILLE, FL 32579

Title: VP () Delete
Name: DORSETT, ELIZABETH HUFF
Address: 107 BAILEY DRIVE
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: DORSETT, WEYMAN T III
Address: 110 WISE AVE
City-St-Zip: NICEVILLE, FL 32579

Title: VP (X) Change () Addition
Name: DORSETT, ELIZABETH HUFF
Address: 110 WISE AVE
City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information supplied with this filing does not qualify for the 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: WEYMAN DORSETT

Electronic Signature of Signing Officer or Director

PS

04/17/2006

Date