

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000082161

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** MCO MANAGEMENT COMPANY

**Current Principal Place of Business:**

391 INDIAN HARBOR RD  
VERO BEACH, FL 32963

**New Principal Place of Business:**

**Current Mailing Address:**

391 INDIAN HARBOR RD  
VERO BEACH, FL 32963

**New Mailing Address:**

6001 N HWY A1A PMB 8334  
INDIAN RIVER SHORES, FL 32963

**FEI Number:** 65-0266087

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORROW, JOSEPH J  
391 INDIAN HARBOR RD  
VERO BEACH, FL 32963 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  
**Name:** MORROW, JOSEPH J  
**Address:** 391 INDIAN HARBOR RD  
**City-St-Zip:** VERO BEACH, FL 32963

**Title:** DVS  
**Name:** MORROW, CLAIRE  
**Address:** 7 CLOSE RD  
**City-St-Zip:** GREENWICH, CT 06831

**Title:** D  
**Name:** MORROW, DONNA  
**Address:** 106 CENTRAL PARK SOUTH #20B  
**City-St-Zip:** NEW YORK, NY 10019

I hereby 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 all other like empowered.

**SIGNATURE:** JOSEPH J MORROW

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02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date