

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000093605

1. Entity Name
MORGAN MACGREGOR CUSTOM BUILDERS, INC.



Principal Place of Business
**7014 AC SKINNER PKWY
STE 290
JACKSONVILLE, FL 32256**

Mailing Address
**7014 AC SKINNER PKWY
STE 290
JACKSONVILLE, FL 32256**

DO NOT WRITE IN THIS SPACE



04162007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1049503

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MONROE, CHRISTOPHER
7014 A.C. SKINNER PARKWAY
STE 290
JACKSONVILLE, FL 32256**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U00000745392
05/16/07-90027-016 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONROE, CHROSTOPHER 313 BOUGAINVILLEA DRIVE JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAY, J.G. JR 7014 A.C. SKINNER PKWY., STE 290 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07

Date

9045963230

Daytime Phone #