

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000112902

Entity Name: MAGILL STRATEGIC CAPITAL, INC.

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

9433 PALM TREE DR
WINDERMERE, FL 34786

New Principal Place of Business:

940 LASCALA DR
WINDERMERE, FL 34786

Current Mailing Address:

9433 PALM TREE DR
WINDERMERE, FL 34786

New Mailing Address:

940 LASCALA DR
WINDERMERE, FL 34786

FEI Number: 59-3691491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGILL, ADAM T
9433 PALM TREE DR
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

MAGILL, ADAM T
940 LASCALA DR
WINDERMERE, FL 34786 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: ADAM T MAGILL

05/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAGILL, ADAM T
Address: 9433 PALM TREE DR
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: MAGILL, AMY K
Address: 9433 PALM TREE DR
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MAGILL, ADAM T
Address: 940 LASCALA DR
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: MAGILL, AMY K
Address: 940 LASCALA DR
City-St-Zip: WINDERMERE, FL 34786

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: ADAM T MAGILL

D

05/02/2007

Electronic Signature of Signing Officer or Director

Date