

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000083629

FILED
Apr 12, 2007
Secretary of State

Entity Name: MELLINGER MICHAELIS GROUP, INCORPORATED

Current Principal Place of Business:

114 NE 11TH AVE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

114 NE 11TH AVE
OCALA, FL 34470

New Mailing Address:

FEI Number: 59-3748114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIELINSKI, KIMBERLY
2632 SOUTHEAST 30TH PLACE
OCALA, FL 34471 US

Name and Address of New Registered Agent:

DEBRA, MELLINGER A
114 NE 11TH AVENUE
OCALA, FL 34470 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: DEBRA MELLINGER

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZIELINSKI, KIMBERLY
Address: 2632 SOUTHEAST 30TH PLACE
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: MELLINGER, DEBRA
Address: 114 NE 11TH AVENUE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DEBRA MELLINGER

SEC

04/12/2007

Electronic Signature of Signing Officer or Director

Date