2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095187

Entity Name: MORGAN CITY, INC.

FILED Feb 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 317 NORTHEAST 9TH TERRACE 5633 RODMAN STREET CAPE CORAL, FL 33909 HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** 317 NORTHEAST 9TH TERRACE 5633 RODMAN STREET CAPE CORAL, FL 33909 HOLLYWOOD, FL 33023 FEI Number: 20-8724549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MALTA, JONATHON PANTER, BRIAN Name: Name: 317 NORTHEAST 9TH TERRACE 5633 RODMAN STREET SUITE 1 Address: Address: CAPE CORAL, FL 33909 City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33023 Title: (X) Change () Addition Title: () Delete Name: ROBLE, GREGORY Name: ROBLE, GREGORY 317 NORTHEAST 9TH TERRACE 5633 RODMAN STREET SUITE 1 Address: Address:

(X) Delete Title: CASTILLO, LUIS Name:

CAPE CORAL, FL 33909

City-St-Zip:

317 NORTHEAST 9TH TERRACE Address: City-St-Zip: CAPE CORAL, FL 33909

HOLLYWOOD, FL 33023 Title: () Change () Addition

Name: Address: City-St-Zip:

City-St-Zip:

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: GREGORY ROBLE S 02/28/2009