

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State


03-24-2008 90055 030 ***150.00

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| DOCUMENT # P02000001111 | |  |
| 1. Entity Name MCNEIL MANAGEMENT SERVICES, INC. | | |

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|---|--|
| Principal Place of Business 1463 OAKFIELD DR SUITE 142 BRANDON, FL 33511 | Mailing Address P.O. BOX 6235 BRANDON, FL 33508-6004 |
|---|--|

DO NOT WRITE IN THIS SPACE

40050995



03122008 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 26-0010437 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

PINNER, PAMELA J
 1463 OAKFIELD DR
 SUITE 142
 BRANDON, FL 33511

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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 _____ (NOTE: Registered Agent signature required when reinstating)

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

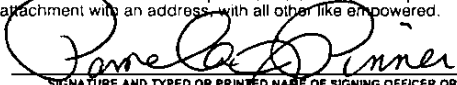
FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D PINNER, PAMELA 1463 OAKFIELD DR STE 142 BRANDON, FL 33511 |
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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:  **3/20/08** **813-571-7100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #