2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P02000128848

Entity Name: MCNALLY MANAGEMENT, INC

Current Principal Place of Business:

521 HARBOR GATE WAY
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9021
LONGBOAT KEY, FL 34228

New Mailing Address:

P. O. BOX 9021
LONGBOAT KEY, FL 34228

FEI Number: 90-0054833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHAEL MCNALLY
521 HARBOR GATE WAY
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: MCNALLY, PATRICK
Address: 12 RAINDANCE TRAIL
City-St-Zip: DILLON, CO 80435

Title: PD ( ) Delete
Name: MCNALLY, MICHAEL
Address: 521 HARBOR GATE WAY
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D ( ) Delete
Name: MCNALLY, MOLLY E D
Address: 383 GRAND ST. M1901
City-St-Zip: NEW YORK, NY 10002 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MICHAEL W MCNALLY PD 03/24/2009

Electronic Signature of Signing Officer or Director — Date