

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001477

FILED
Jan 28, 2007
Secretary of State

Entity Name: MCDUFFIE/MORRIS FINANCIAL GROUP, INC.

Current Principal Place of Business:

4630 HARBOUR VILLAGE BLVD.
SUITE 1502
PONCE INLET, FL 321277266 US

New Principal Place of Business:

Current Mailing Address:

4630 HARBOUR VILLAGE BLVD.
SUITE 1502
PONCE INLET, FL 321277266 US

New Mailing Address:

FEI Number: 52-1940798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, CLIFTON MR
4630 HARBOUR VILLAGE BLVD.
PONCE INLET, FL 32127 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: MORRIS, CLIFTON JR.
Address: 4630 HARBOUR VILLAGE BLVD., SUITE 1502
City-St-Zip: PONCE INLET, FL 32127 US

Title: D () Delete
Name: MORRIS, ERETTA M
Address: 788 SUGARHOUSE DRIVE
City-St-Zip: PORT ORANGE, FL 32129 US

Title: D () Delete
Name: MORRIS, AMIEL Y
Address: 8739 CONTEE ROAD
City-St-Zip: LAUREL, MD 20708

Title: D () Delete
Name: MORRIS, CLIFTON J III
Address: PO BOX 291863
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MORRIS, ERETTA M
Address: 117 BROWN CRANE COURT
City-St-Zip: DAYTONA BEACH, FL 32119 US

Title: D (X) Change () Addition
Name: MORRIS, AMIEL Y
Address: 6425 PARK POND DRIVE
City-St-Zip: CHARLOTTE, NC 28262 US

Title: D (X) Change () Addition
Name: MORRIS, CLIFTON J III
Address: PO BOX 291863
City-St-Zip: PORT ORANGE, FL 32129 US

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: CLIFTON MORRIS JR

PRES

01/28/2007

Electronic Signature of Signing Officer or Director

_____ Date