

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062288

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: MORRISON ENGINEERING, INC.

## Current Principal Place of Business:

3930 STATE ROAD 29  
LABELLE, FL 33935 US

## New Principal Place of Business:

3930 N. STATE ROAD 29 SW  
LABELLE, FL 33935 US

## Current Mailing Address:

3930 STATE ROAD 29  
LABELLE, FL 33935 US

## New Mailing Address:

FEI Number: 86-1106487      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORRISON, SCOT A  
3930 STATE ROAD 29  
LABELLE, FL 33935 US

## Name and Address of New Registered Agent:

MORRISON, SCOT A  
3930 N. STATE ROAD 29 SW  
LABELLE, FL 33935 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: SCOT A. MORRISON

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MORRISON, SCOT A  
Address: 3930 STATE ROAD 29  
City-St-Zip: LABELLE, FL 33935 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MORRISON, SCOT A  
Address: 3930 N. STATE ROAD 29 SW  
City-St-Zip: LABELLE, FL 33935 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: SCOT A. MORRISON

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date