2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082369

Entity Name: MCGRATH BUILDING CORPORATION

() Delete

MCGRATH, SHAINA

216 COLONIAL PARK DR.

SPRINGFIELD, PA 19064

Title:

Name:

Address:

City-St-Zip:

FILED May 16, 2006 Secretary of State

Littly Name. Wicoratti Bollding Corforation						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
823 SW 56 ⁻ CAPE COR	TH ST. AL, FL 339147	224				
Current Mailing Address:			New Maili	New Mailing Address:		
823 SW 56 ⁻ CAPE COR	TH ST. AL, FL 339147	224				
FEI Number:	11-3722884	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status	Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
MCGRATH, JOHN T MR. 1203 GOVERNORS SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 US			823 SW 56	MCGRATH, JOHN T MR. 823 SW 56TH ST CAPE CORAL, FL 339147224 US		
The above in the State		bmits this statement for the pur	pose of changing i	ts registered office or registered	agent, or both,	
SIGNATURE:				05/16/2006		
Electronic Signature of Registered Agent				Date		
		2)(b), F.S., the corporation did not re Frust Fund Contribution ().	eceive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () D MCGRATH, JOHN 216 COLONIAL P SPRINGFIELD, P	ARK DR.	Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition MCGRATH, JOHN T 216 COLONIAL PARK DR. SPRINGFIELD, PA 19064		
Title: Name: Address: City-St-Zip:	VT () E MCGRATH, SANE 216 COLONIAL P SPRINGFIELD, P	ARK DR.	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MCGRATH, SANDRA 216 COLONIAL PARK DR. SPRINGFIELD, PA 19064		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN T. MCGRATH PRES 05/16/2006

() Change () Addition