

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119679

Entity Name: MACO MANAGEMENT, INC.

FILED
Mar 14, 2008
Secretary of State

Current Principal Place of Business:

324 NORTH DALE MABRY HWY, SUITE 100
TAMPA, FL 336091265

New Principal Place of Business:

324 NORTH DALE MABRY HWY
SUITE 100
TAMPA, FL 336091265

Current Mailing Address:

324 NORTH DALE MABRY HWY, SUITE 100
TAMPA, FL 336091265

New Mailing Address:

324 NORTH DALE MABRY HWY
SUITE 100
TAMPA, FL 336091265

FEI Number: 80-0118032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKS, JAMES P
324 NORTH DALE MABRY HWY, SUITE 100
TAMPA, FL 336091265 US

Name and Address of New Registered Agent:

MARKS, JAMES P
324 NORTH DALE MABRY HWY
SUITE 100
TAMPA, FL 336091265 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:

03/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MARKS, JAMES
Address: 3825 HENDERSON BLVD SUITE 400
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: COLLINS, MARK
Address: 3825 HENDERSON BLVD SUITE 400
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: MARKS, SUZANNE
Address: 3825 HENDERSON BLVD SUITE 400
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: MARKS, JAMES
Address: 324 N DALE MABRY HWY, SUITE 100
City-St-Zip: TAMPA, FL 33609

Title: VD (X) Change () Addition
Name: COLLINS, MARK
Address: 324 N DALE MABRY HWY, SUITE 100
City-St-Zip: TAMPA, FL 33609

Title: T (X) Change () Addition
Name: MARKS, SUZANNE
Address: 324 N DALE MABRY HWY, SUITE 100
City-St-Zip: TAMPA, FL 33609

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: JAMES P MARKS

P

03/14/2008

Electronic Signature of Signing Officer or Director

Date