

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148940

Entity Name: MEC TECHNOLOGIES, INC.

FILED  
Apr 07, 2009  
Secretary of State

## Current Principal Place of Business:

12768 MUIRFIELD BLVD NORTH  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

## Current Mailing Address:

12768 MUIRFIELD BLVD NORTH  
JACKSONVILLE, FL 32225

## New Mailing Address:

FEI Number: 20-1816966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AKEL, EDWARD C  
1 INDEPENDENT DR SUITE 2301  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

WILCOX, RALEIGH M CPA  
13500 SUTTON PARK DR , SOUTH  
SUITE 703  
JACKSONVILLE, FL 32224 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: RALEIGH M. WILCOX, CPA.

04/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MOORE, JONNY D  
Address: 12768 MUIRFIELD BLVD NORTH  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: MOORE, JASON S  
Address: 11248 BLACKJACK OAK DR  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: WILLIAMS, KIMBERLY B  
Address: 401 BRODY COVE TRAIL  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MOORE, JONNY D  
Address: 12768 MUIRFIELD BLVD NORTH  
City-St-Zip: JACKSONVILLE, FL 32225

Title: SEC (X) Change ( ) Addition  
Name: MOORE, JASON S  
Address: 11248 BLACKJACK OAK DR  
City-St-Zip: JACKSONVILLE, FL 32225

Title: TRE (X) Change ( ) Addition  
Name: WILLIAMS, KIMBERLY B  
Address: 401 BRODY COVE TRAIL  
City-St-Zip: JACKSONVILLE, FL 32225

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: JONNY D. MOORE

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date