2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154193

Entity Name: MCP AND ASSOCIATES, INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

186 MAITLAND AVE. 495 DEER POINTE CIR

CASSELBERRY, FL 32707 US

ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address: New Mailing Address:

186 MAITLAND AVE. 495 DEER POINTE CIR

CASSELBERRY, FL 32707 US

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 20-1859266 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOWARD, PAMELA W
186 MAITLAND AVE.
HOWARD, PAMELA W
495 DEER POINTE CIR
CASSELBERRY, FL 32707 US

E CASSELBERRY, FL 32707 ALTAMONTE SPRINGS, FL 32701 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.

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HOWARD, PAMELA W HOWARD, PAMELA W Name: Name: 186 MAITLAND AVE. #E 495 DEER POINTE CIR Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US City-St-Zip: CASSELBERRY, FL 32707 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SANDBERG, DEBORAH V
 Name:
 SANDBERG, DEBORAH V

 Address:
 220 MALTESE CIRCLE #8
 Address:
 136 MONARCH CIR, #5

 City-St-Zip:
 FERN PARK, FL 32730 US
 City-St-Zip:
 FERN PARK, FL 32730 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: PAMELA W. HOWARD P 04/25/2006