2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160105

Entity Name: MCMANCERA IMPROVEMENTS CORP

FILED Jan 09, 2008 Secretary of State

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

1111 WHISPERING WINDS CT APOPKA, FL 32703 1111 WHISPERING WINDS CT APOPKA, FL 32703 US

Current Mailing Address: New Mailing Address:

1111 WHISPERING WINDS CT P.O BOX 917402 APOPKA, FL 32703 P.O BOX 917402 LONGWOOD, FL 32791 US

FEI Number: 20-1934811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MANCERA, OSCAR H 1111 WHISPERING WINDS CT APOPKA, FL 32703 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC (Y) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS () Delete Title: PS (X) Change () Addition Name: MANCERA, OSCAR H Name: MANCERA, OSCAR H

Address: 1111 WHISPERING WINDS CT Address: 1111 WHISPERING WINDS CT
City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703 US

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: OSCAR H. MANCERA PS 01/09/2008