

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000134882

Entity Name: MACC ESSENCE, INC.

FILED
Feb 08, 2006
Secretary of State

Current Principal Place of Business:

111 N. PINE ISLAND RD., STE. 205
PLANTATION, FL 33324

New Principal Place of Business:

111 N. PINE ISLAND RD., STE. 205
205
PLANTATION, FL 33324

Current Mailing Address:

111 N. PINE ISLAND RD., STE. 205
PLANTATION, FL 33324

New Mailing Address:

111 N. PINE ISLAND RD., STE. 205
205
PLANTATION, FL 33324

FEI Number: 32-0162327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DSOUZA, ELIAS LEONARD ESQ.
111 N. PINE ISLAND RD., STE. 205
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

DSOUZA, ELIAS LEONARD ESQ.
111 N. PINE ISLAND RD., STE. 205
205
PLANTATION, FL 33324 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:

02/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HAMILTON, CLOVER
Address: 111 N. PINE ISLAND RD., STE. 205
City-St-Zip: PLANTATION, FL 33324

Title: DV () Delete
Name: ROWE, MARLENE
Address: 111 N. PINE ISLAND RD., STE. 205
City-St-Zip: PLANTATION, FL 33324

Title: DS () Delete
Name: SANDERSON-BRANSFIELD, CAROLYN
Address: 111 N. PINE ISLAND RD., STE. 205
City-St-Zip: PLANTATION, FL 33324

Title: DT () Delete
Name: TAYLOR-SMITH, ANGELA
Address: 111 N. PINE ISLAND RD., STE. 205
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANGELA TAYLOR-SMITH

DT

02/08/2006

Electronic Signature of Signing Officer or Director

Date