
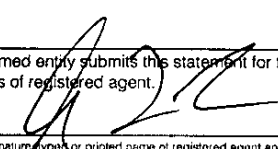
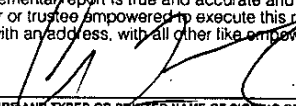


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90128 037 ***150.00

DOCUMENT # P06000155642																																																																																																																																			
1. Entity Name MCC EQUIPMENT , INC																																																																																																																																			
Principal Place of Business 901 NORTH LAKE DESTINY ROAD SUITE 370 MAITLAND, FL 32751			Mailing Address 901 NORTH LAKE DESTINY ROAD SUITE 370 MAITLAND, FL 32751																																																																																																																																
2. Principal Place of Business - No P.O. Box # 903 OUTER ROAD		3. Mailing Address 903 OUTER ROAD																																																																																																																																	
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																	
City & State ORLANDO, FL		City & State ORLANDO, FL		4. FEI Number 20-8097923																																																																																																																															
Zip 32814		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																															
6. Name and Address of Current Registered Agent MCCORKLE, ANDREW L PRES 901 NORTH LAKE DESTINY ROAD SUITE 370 MAITLAND, FL 32751			7. Name and Address of New Registered Agent Name: MCCORKLE, ANDREW L. PRES Street Address (P.O. Box Number is Not Acceptable): 903 OUTER ROAD City: ORLANDO FL Zip Code: 32814																																																																																																																																
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  DATE: 4/22/08																																																																																																																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">P,D MCCORKLE, ANDREW L</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">P,D MCCORKLE, ANDREW L.</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>901 NORTH LAKE DESTINY ROAD, SUITE 370</td> <td></td> <td>NAME</td> <td>903 OUTER ROAD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>MAITLAND, FL 32751</td> <td></td> <td>STREET ADDRESS</td> <td>ORLANDO, FL 32814</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>S,T MCCORKLE, CLAIR</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>S,T MCCORKLE, CLAIR W.</td> <td style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>901 NORTH LAKE DESTINY ROAD, SUITE 370</td> <td></td> <td>NAME</td> <td>903 OUTER ROAD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>MAITLAND, FL 32751</td> <td></td> <td>STREET ADDRESS</td> <td>ORLANDO, FL 32814</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	P,D MCCORKLE, ANDREW L	<input type="checkbox"/> Delete	TITLE	P,D MCCORKLE, ANDREW L.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	901 NORTH LAKE DESTINY ROAD, SUITE 370		NAME	903 OUTER ROAD		STREET ADDRESS	MAITLAND, FL 32751		STREET ADDRESS	ORLANDO, FL 32814		CITY - ST - ZIP			CITY - ST - ZIP			TITLE	S,T MCCORKLE, CLAIR	<input type="checkbox"/> Delete	TITLE	S,T MCCORKLE, CLAIR W.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	901 NORTH LAKE DESTINY ROAD, SUITE 370		NAME	903 OUTER ROAD		STREET ADDRESS	MAITLAND, FL 32751		STREET ADDRESS	ORLANDO, FL 32814		CITY - ST - ZIP			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY - ST - ZIP			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY - ST - ZIP			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY - ST - ZIP			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with any address, with all other like empowered. SIGNATURE:  DATE: 4/22/08 DAYTIME PHONE #: 407-373-7800																																																																																																																																			