2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2008
Secretary of State

DOCUMENT# P07000048374

Entity Name: MCFA INC.,

Current Principal Place of Business:

1840 NORTHWEST 3RD AVENUE
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

1840 NORTHWEST 3RD AVENUE
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 75-3239070 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROZIER, MICHAEL SR.
1206 BUENA VISTA AVENUE
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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:	P	( ) Delete
Name:	MCFADDEN, ELLA T	
Address:	1840 NORTHWEST 3RD AVENUE	
City-St-Zip:	POMPANO BEACH, FL 33060	
Title:	VP	( ) Delete
Name:	MCFADDEN, WALTER	
Address:	1840 NORTHWEST 3RD AVENUE	
City-St-Zip:	POMPANO BEACH, FL 33060	
Title:	S	( ) Delete
Name:	TILLMAN, TIRANA M	
Address:	217 NORTHWEST 9TH STREET	
City-St-Zip:	POMPANO BEACH, FL 33060	
Title:	T	( ) Delete
Name:	MCFADDEN, WALTER J	
Address:	1840 NORTHWEST 3RD STREET	
City-St-Zip:	POMPANO BEACH, FL 33060	

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 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: ELLA T MCFADDEN P 03/25/2008

Electronic Signature of Signing Officer or Director — Date