

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000070307

Entity Name: MUNI GROUP, INC.

FILED
Jan 30, 2008
Secretary of State

Current Principal Place of Business:

498 PALM SPRINGS DRIVE
SUITE 100
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

498 PALM SPRINGS DRIVE
SUITE 100
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

237 SOUTH WESTMONTE DR
SUITE 305
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

237 SOUTH WESTMONTE DR
SUITE 305
ALTAMONTE SPRINGS, FL 32714

FEI Number: 26-0372945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLINE, VICTOR ESQ.
201 E. PINE STREET
SUITE 500
ORLANDO, FL 32801 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: MUSZYNSKI, CHARLES
Address: 498 PALM SPRINGS DRIVE, SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP () Delete
Name: STAIMAN, MARSHALL
Address: 498 PALM SPRINGS DRIVE, SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S () Delete
Name: STAIMAN, MARSHALL
Address: 498 PALM SPRINGS DRIVE, SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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:

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: CHARLES MUSZYNSKI

P

01/30/2008

Electronic Signature of Signing Officer or Director

Date