

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000058635

**FILED**  
**Sep 16, 2010**  
**Secretary of State**

**Entity Name:** MCBAYNE GLOVER CONSTRUCTION, INC.

**Current Principal Place of Business:**

3727 RIPPLEBROOK  
HOUSTON, TX 77045

**New Principal Place of Business:**

12914 WHITE HEATHER  
HOUSTON, TX 77045

**Current Mailing Address:**

1808 SW 151 AVENUE  
MIRAMAR, FL 33027 US

**New Mailing Address:**

19441 NW 53 CT  
MIAMI, FL 33055 US

**FEI Number:** 27-0536823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCBAYNE, TREVOR  
1808 SW 151 AVENUE  
MIRAMAR, FL 33027 US

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

MCBAYNE, TREVOR  
19441 NW 53 CT  
MIAMI, FL 33055 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:**

09/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** GLOVER, GARY A  
**Address:** 12914 WHITE HEATHER  
**City-St-Zip:** HOUSTON, TX 77045

**Title:** P  
**Name:** MCBAYNE, TREVOR L  
**Address:** 19441 NW 53 CT  
**City-St-Zip:** MIAMI, FL 33055

**Title:** S  
**Name:** FERGUSON-SMITH, MABLE  
**Address:** 19441 NW 53 CT  
**City-St-Zip:** MIAMI, FL 33055

**Title:** T  
**Name:** PETERS, SHARON  
**Address:** 19441 NW 53 CT  
**City-St-Zip:** MIAMI, FL 33055

I hereby 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 all other like empowered.

**SIGNATURE:** MABLE FERGUSON SMITH

S

09/16/2010

Electronic Signature of Signing Officer or Director

Date