

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000043373

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** MCNAIR CONSULTING GROUP, INC.

**Current Principal Place of Business:**

15000 NE 6TH PLACE  
NORTH MIAMI, FL 33161 US

**New Principal Place of Business:**

**Current Mailing Address:**

15000 NE 6TH PLACE  
NORTH MIAMI, FL 33161 US

**New Mailing Address:**

P O BOX 640113  
MIAMI, FL 33164 US

**FEI Number:** 80-0725478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIVEY, ZANDRAS L JR.,  
3605 NE 207 SREET  
UNIT #4206  
AVENTURA, FL 33180 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SPIVEY, GAIL M  
Address: 15000 NE 6TH PLACE  
City-St-Zip: NORTH MIAMI, FL 3161 US

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: GAIL M. SPIVEY

CEO

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date