

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000041837

**FILED**  
**Apr 23, 2007**  
**Secretary of State**

**Entity Name:** CONSTRUCTION MANAGEMENT CONSULTING GROUP, INC.

**Current Principal Place of Business:**

1515 CR 210  
203  
JACKSONVILLE, FL 32259 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 551571  
JACKSONVILLE, FL 322551571 US

**New Mailing Address:**

**FEI Number:** 59-3185405      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BROOKS, MICHAEL L  
437 E MONROE ST  
SUITE 202  
JACKSONVILLE, FL 32202 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: PPST ( ) Delete  
Name: GREGORY, STUART A  
Address: 3 KIMBERLY LANE  
City-St-Zip: ST. AUGUSTINE, FL 32080

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PPST (X) Change ( ) Addition  
Name: GREGORY, STUART A  
Address: 1702 WINDJAMMER LANE  
City-St-Zip: ST. AUGUSTINE, FL 32084

I hereby certify that the information supplied with this filing does not qualify for the 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: STUART A. GREGORY

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date