2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007 8:00 am
Secretary of State
02-08-2007 90047 017 ***150.00

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1. Entity Name
MCH INC.

40011000

Principal Place of Business	Mailing Address
6110 NW 1ST PLACE SUITE A GAINESVILLE, FL 32607 US	C/O SHEY ASSOC INC 6110 NW 1ST PL. SUITE A GAINESVILLE, FL 32607 US

01152007 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-0473012

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SHEY, LAURA
6110 NW 1ST PLACE
SUITE A
GAINESVILLE, FL 32607

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VTD
NAME	BARR, ELLIS L
STREET ADDRESS	6110 NW 1ST PLACE SUITE A
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	PD
NAME	SHEY, LAURA
STREET ADDRESS	6110 NW 1ST PLACE SUITE A
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	SD
NAME	SHEY, KARA E
STREET ADDRESS	6110 NW 1ST PLACE SUITE A
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA SHEY, PRESIDENT President 2-5-07 (352)331-1606
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone #

laura shey