2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000024186

7251 ALBANY ROAD

FORT MYERS, FL 33912

Address:

City-St-Zip:

Entity Name: MICRO CONTROL SYSTEMS INC

FILED Feb 09, 2007 Secretary of State

Entity Nai	me: MICRO	JONTROL SYS	IEMS, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
	ERPRISE PAF S, FL 33905	RKWAY US						
Current Mailing Address:				New Mailing Address:				
	ERPRISE PAF S, FL 33905	RKWAY US						
FEI Number:	: 65-0478726	FEI Number Ap	oplied For()	FEI Number Not Appli	cable ()	Certificate of Status	Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
	CK, JOHN NNA CIRCLE ERS, FL 3391	9 US						
	named entity of Florida.	submits this sta	tement for the pu	ırpose of changing it	s registered	office or registered	agent, or both,	
SIGNATU	RE:							
	Electro	nic Signature of	Registered Ager	nt		Date		
Election Car	npaign Financir	ng Trust Fund Con	tribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VPD (WALTERICK, 6618 JOANNA FORT MYERS	CIRCLE		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	WALTERICK,	RAPH CREEK LANE	Ē	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	SD (TONEY, ROBE 14840 LAKE C FT. MYERS, F	LIVE DRIVE		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name:	VPM (ANDERSEN. F) Delete		Title: Name:	VPM () ANDERSEN, R	⟨) Change () Addition RON		

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.

Address:

City-St-Zip:

SIGNATURE: JOHN WALTERICK VPD 02/09/2007

17441 STEPPING STONE ROAD

FORT MYERS, FL 33967