

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000055271

FILED
Aug 27, 2007
Secretary of State

Entity Name: MCRAE CONSTRUCTION, INC.

Current Principal Place of Business:

104 NORTH GROSSE AVENUE
TARPON SPRINGS, FL 34689

New Principal Place of Business:

9015 ATLAS DRIVE
SAINT CLOUD, FL 34773

Current Mailing Address:

104 NORTH GROSSE AVENUE
TARPON SPRINGS, FL 34689

New Mailing Address:

3802 PASADENA AVENUE
FLORENCE, AL 35633

FEI Number: 59-3386288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ACCOUNTING ON US
30 ADAMS AVENUE
KISSIMMEE, FL 34744 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: MARTINE COLOMBEY

08/27/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MCRAE, STEVEN A
Address: 104 NORTH GROSSE AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VS () Delete
Name: MCRAE, RITA
Address: 104 NORTH GROSSE AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MCRAE, STEVEN A
Address: 3802 PASADENA AVENUE
City-St-Zip: FLORENCE, AL 35633

Title: VS (X) Change () Addition
Name: MCRAE, ERIC O
Address: 5345 HOLOPAW ROAD
City-St-Zip: SAINT CLOUD, FL 34773

Title: TREA () Change (X) Addition
Name: MCRAE, JEREMI P
Address: 9015 ATLAS DRIVE
City-St-Zip: SAINT CLOUD, FL 34773

Title: SECR () Change (X) Addition
Name: MCRAE, NADIA I
Address: 30 ADAMS AVENUE
City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN A MCRAE

PTD

08/27/2007

Electronic Signature of Signing Officer or Director

Date