2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000056348

Entity Name: MAC PROPERTIES, INC.

FILED Mar 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 700 CENTRAL PARKWAY STUART, FL 34994 US **Current Mailing Address: New Mailing Address:** 8607 SW PERRY LN STUART, FL 349977936 US FEI Number: 65-0680426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCREARY, W.T. 8607 SW PERRY LN STUART, FL 349977936 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MCCREARY, WIT SR Name: Name: 8607 SW PERRY LN Address: Address: City-St-Zip: STUART, FL 349977936 City-St-Zip: Title: DV Title: () Delete () Change () Addition MCCREARY, T J Name: Name: 700 CENTRAL PARKWAY Address: Address: City-St-Zip: STUART, FL 34994 City-St-Zip: Title: Title: DP () Delete () Change () Addition MCCREARY, S T Name: Name: 127 PALASADES DRIVE Address: Address: City-St-Zip: SIGNAL MOUNTAIN, TN 37377 City-St-Zip: Title: DV () Delete Title: () Change () Addition MCCREARY, MW Name: Name: Address: 700 CENTRAL PARKWAY Address: City-St-Zip: STUART, FL 34994 City-St-Zip: Title: DV Title: () Delete () Change () Addition MCCREARY, W T JR Name: Name: 127 PALASADES DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: W T MCCREARY D 03/06/2008

City-St-Zip:

SIGNAL MOUNTAIN, TN 37377