

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000069544

Entity Name: M.C.M. CONCEPTS, INC.

FILED
Feb 07, 2005
Secretary of State

Current Principal Place of Business:

200 TOWNE CENTER CIR
SEMINOLE TOWNE CENTER
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

1631 S. NOVA RD
SOUTH DAYTONA, FL 32119 US

New Mailing Address:

4421 EASTPORT PARKWAY
EASTPORT BUSINESS PARK
PORT ORANGE, FL 32127 US

FEI Number: 59-3409120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNETT, RANDOM R
501 NORTH GRANDVIEW AVENUE
DAYTONA BEACH, FL 32118 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: ST () Delete
Name: MILLER, BARBARA J
Address: 1631 S. NOVA RD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: DP () Delete
Name: MILLER, MARK J
Address: 1631 S. NOVA RD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: D (X) Delete
Name: MILLER, MARK J
Address: 1631 S. NOVA RD
City-St-Zip: DAYTONA BEACH, FL 32119

Title: V () Delete
Name: COOPER, WILLIAM C
Address: 107 COLONY COURT
City-St-Zip: LENOIR, NC 28645

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: MILLER, BARBARA J
Address: 4421 EASTPORT PARKWAY
City-St-Zip: PORT ORANGE, FL 32127

Title: DP (X) Change () Addition
Name: MILLER, MARK J
Address: 4421 EASTPORT PARKWAY
City-St-Zip: PORT ORANGE, FL 32127

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA J. MILLER

S/T

02/07/2005

Electronic Signature of Signing Officer or Director

Date