

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000078567**

1. Entity Name  
**MDH FOXFIRE I, INC.**



Principal Place of Business

**753 E GLENN AVE  
AUBURN, AL 36831**

Mailing Address

**P.O. BOX 1088  
AUBURN, AL 36831 US**



03212006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**58-2371269**

Applied For  
Not Applicable

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

8. Name and Address of Current Registered Agent

**BUILDER, J. LINDSAY JR.  
369 N NEW YORK AVE  
3RD FLOOR  
WINTER PARK, FL 32789**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SHANNON, MICHAEL V
STREET ADDRESS	753 E GLENN AVE
CITY-ST-ZIP	AUBURN, AL 36831
TITLE	D
NAME	STROBEL, DAVID L
STREET ADDRESS	753 E GLENN AVE
CITY-ST-ZIP	AUBURN, AL 36831
TITLE	D
NAME	WEAVER, C. HADLEY JR.
STREET ADDRESS	753 E GLENN AVE
CITY-ST-ZIP	AUBURN, AL 36831
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1000000481651  
04/11/06 00043-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Michael V Shannon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3/21/06*  
Date

*334-821-0928*  
Daytime Phone #