2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 21, 2008 08:00 Al **DOCUMENT # P98000097746 Secretary of State** MECO PROPERTIES, INC. Mailing Address Principal Place of Business 969 BUCYRUS LANE P.O. BOX 1004 GONZALEZ, FL 32560 CANTONMENT, FL 32533 CR2E034 (11/05) 03182008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3553556 Not Applica **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ELLIOTT, MICHAEL C 969 BUCYRUS LANE CANTONMENT, FL 32533 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 acc the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be U000000865722 FILE NOWI!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 '07/08-80040-004 150.AA OFFICERS AND DIRECTORS 10. TITLE PST NAME **ELLIOTT, MICHAEL C** 969 BUCYRUS LANE STREET ADDRESS CITY-ST-ZIP CANTONMENT, FL 32533 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informatio 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 direct 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 1 changed, or on an attachment with an address, with all other like empowered.

Myhail C Elliott

STREET ADDRESS CITY-ST-ZIP