2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V67438

Entity Name: MORGAN COMTEC, INC.

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
9645 NAVA NAVARRE,						
Current Mailing Address:			New Mailir	New Mailing Address:		
1114 E. COI PO BOX 28: OPELIKA, A	_	RCLE				
FEI Number: 5	59-3150078	FEI Number Applied For () FEI N	umber Not Appli	icable () Certificate of Status Des	ired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
HURD, THOMAS C JR 9645 NAVARRE PKY NAVARRE, FL 32566 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.						
SIGNATUR	E:					
	Electroni	Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Address:	PD () I HURD, THOMAS 1114 E. COLLIN' OPELIKA, AL 36	WOOD CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	STD () I HURD, ROSE AN 1114 E. COLLIN' OPELIKA, AL 36	WOOD CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD () I MORGAN, CONS 9645 NAVARRE NAVARRE, FL 3	PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () I SEGREST, CHAI 634 CARY DRIVI AUBURN, AL 36	RLES D E	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SEGREST, CHARLES D 634 CARY DRIVE AUBURN, AL 36830		
Title: Name: Address: City-St-Zip:	D () I STEPHENS, SEL 259 TUTHILL LAI MOBILE, AL 325	NE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition STEPHENS, SELDEN H 259 TUTHILL LANE MOBILE, AL 36608		
Title: Name: Address: City-St-Zip:	D ()I MORGAN, JOHN 9645 NAVARRE NAVARRE, FL 3	PARKWAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: THOMAS C. HURD PRES 01/17/2008