

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002534

FILED
Jan 23, 2006
Secretary of State

Entity Name: MCCARTHY IMPROVEMENT COMPANY

Current Principal Place of Business:

5401 VICTORIA AVENUE STE. 700
DAVENPORT, IA 52807

New Principal Place of Business:

5401 VICTORIA AVENUE STE. 700
SUITE 700
DAVENPORT, IA 52807

Current Mailing Address:

5401 VICTORIA AVENUE STE. 700
DAVENPORT, IA 52807

New Mailing Address:

5401 VICTORIA AVENUE STE. 700
SUITE 700
DAVENPORT, IA 52807

FEI Number: 42-0402540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: C () Delete
Name: BUSH, JOHN L
Address: 5401 VICTORIA AVENUE STE. 700
City-St-Zip: DAVENPORT, IA 52807

Title: D () Delete
Name: BLANC, GENE
Address: 5401 VICTORIA AVENUE STE. 700
City-St-Zip: DAVENPORT, IA 52807

Title: D () Delete
Name: EGAN, ED
Address: 5401 VICTORIA AVENUE STE. 700
City-St-Zip: DAVENPORT, IA 52807

Title: P () Delete
Name: BUSH, JOSEPH D
Address: 5401 VICTORIA AVENUE STE. 700
City-St-Zip: DAVENPORT, IA 52807

Title: VP () Delete
Name: SINES, RONALD
Address: 5401 VICTORIA AVENUE STE. 700
City-St-Zip: DAVENPORT, IA 52807

Title: ST () Delete
Name: BUSH, LAWRENCE P
Address: 5401 VICTORIA AVENUE STE. 700
City-St-Zip: DAVENPORT, IA 52807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: JOSEPH D BUSH

PRES

01/23/2006

Electronic Signature of Signing Officer or Director

_____ Date