

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000008605

FILED  
Mar 15, 2005  
Secretary of State

Entity Name: MCKENNA'S SEAFOOD INCORPORATED

**Current Principal Place of Business:**

47 FOREST VIEW WAY  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

47 FOREST VIEW WAY  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 59-3694101      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCKENNA, MICHAEL  
47 FOREST VIEW WAY  
ORMOND BEACH, FL 32174      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: P      ( ) Delete  
Name: MCKENNA, MICHAEL  
Address: 47 FOREST VIEW WAY  
City-St-Zip: ORMOND BEACH, FL 32176

Title: V      ( ) Delete  
Name: MCKENNA, CHRIS  
Address: 9250 DUNDEE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

Title: TR      ( ) Delete  
Name: MCKENNA, JANET M  
Address: 47 FOREST VIEW WAY  
City-St-Zip: ORMOND BEACH, FL 32174 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: MCKENNA, MICHAEL  
Address: 47 FOREST VIEW WAY  
City-St-Zip: ORMOND BEACH, FL 32174

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: MICHAEL MCKENNA

PRES

03/15/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date