

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 154206

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** MCCULLOUGH AND MCRAE, INC.

**Current Principal Place of Business:**

1725 MEMORIAL PARK DR.  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

1725 MEMORIAL PARK DR.  
JACKSONVILLE, FL 32204

**New Mailing Address:**

**FEI Number:** 59-0586451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCRAE, ELIZABETH G.  
1725 MEMORIAL PARK DR.  
JACKSONVILLE, FL 32204 US

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

MCRAE, ELIZABETH G.  
1725 MEMORIAL PARK DR.  
JACKSONVILLE, FL 32204 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.

**SIGNATURE:** ELIZABETH G. MCRAE

04/13/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MCRAE, ELIZABETH G  
**Address:** 1725 MEMORIAL PARK DR.  
**City-St-Zip:** JACKSONVILLE, FL 32204 US

I hereby 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 all other like empowered.

**SIGNATURE:** ELIZABETH G. MCRAE

PRES

04/13/2011

Electronic Signature of Signing Officer or Director

Date