

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 437837

FILED  
Jul 06, 2007  
Secretary of State

Entity Name: MCCARTHEY INVESTMENTS CORPORATION

**Current Principal Place of Business:**

94 SECOND STREET SOUTH  
NAPLES, FL 341025909 US

**New Principal Place of Business:**

**Current Mailing Address:**

94 SECOND STREET SOUTH  
NAPLES, FL 341025909

**New Mailing Address:**

FEI Number: 59-1495876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCARTHEY, EDWARD F  
94 SECOND STREET S.  
NAPLES, FL 34102 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: MCCARTHEY, EDWARD F.,  
Address: 94 SECOND STREET S.  
City-St-Zip: NAPLES, FL 34102

Title: S ( ) Delete  
Name: SHARP, PAMELA G  
Address: 132 CORAL VINE DR.  
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete  
Name: PRUCE, GINA D  
Address: P.O. BOX 629  
City-St-Zip: LEWISBURG, KY 42256

**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:

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: EDWARD F. MCCARTHEY

PDT

07/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date