

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 459815

**FILED**  
**Feb 04, 2010**  
**Secretary of State**

**Entity Name:** MCCORMICK CONTRACTING COMPANY, INC.

**Current Principal Place of Business:**

1405 GEORGIA AVE.  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

**Current Mailing Address:**

1405 GEORGIA AVE.  
LYNN HAVEN, FL 32444

**New Mailing Address:**

**FEI Number:** 59-1565266

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITTON, JEFFREY P  
565 HARRISON AVENUE  
PANAMA CITY, FL 32401 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:** S  
**Name:** MCCORMICK PATRICIA M  
**Address:** 920 CAROLINA AVE.  
**City-St-Zip:** LYNN HAVEN FL,

**Title:** PD  
**Name:** MCCORMICK DON E.  
**Address:** 920 CAROLINA AVE.  
**City-St-Zip:** LYNN HAVEN FL,

**Title:** V  
**Name:** MCCORMICK, MICHAEL P  
**Address:** 218 FLORIDA AVE  
**City-St-Zip:** LYNN HAVEN, FL

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:** PATRICIA M. MCCORMICK

S

02/04/2010

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

\_\_\_\_\_  
Date