

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 493195

Entity Name: MCCLENDON, INC.

**FILED**  
**Feb 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

528 N. CROOKED LAKE DRIVE  
BABSON PARK, FL 33827

**New Principal Place of Business:**

**Current Mailing Address:**

528 N. CROOKED LAKE DRIVE  
BABSON PARK, FL 33827

**New Mailing Address:**

FEI Number: 59-1671247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCLENDON, JAMES C.  
528 N. CROOKED LAKE DRIVE  
BABSON PARK, FL 33827 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: PD  
Name: MCCLENDON, JAMES C  
Address: 528 N CROOKED LAKE DR  
City-St-Zip: BABSON PARK, FL 33827

Title: STD  
Name: MCCLENDON, JOYCE M  
Address: 528 N CROOKED LAKE DR  
City-St-Zip: BABSON PARK, FL 33827

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: JAMES C. MCCLENDON

PRES

02/25/2010

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

\_\_\_\_\_  
Date