

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H42843

FILED  
May 02, 2004  
Secretary of State

Entity Name: MCKAY BOULEVARD PROPERTIES, INC.

## Current Principal Place of Business:

1847 NORTH STREET  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

## Current Mailing Address:

1847 NORTH STREET  
LONGWOOD, FL 32750 US

## New Mailing Address:

FEI Number: 37-5400602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BECKER, ANGELA E  
1847 NORTH ST  
LONGWOOD, FL 32750

## 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: PD ( ) Delete  
Name: BECKER, DAVID R.,  
Address: 1847 NORTH ST.  
City-St-Zip: LONGWOOD, FL

Title: SD ( ) Delete  
Name: BECKER, ANGELA E.,  
Address: 1847 NORTH ST.  
City-St-Zip: LONGWOOD, FL

Title: VPD ( ) Delete  
Name: PLANTE, GEORGE  
Address: 107 PEREGRINE COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD ( ) Delete  
Name: PLANTE, LOIS  
Address: 107 PEREGRINE COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

## 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:

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: DAVID R. BECKER

PD

05/02/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date