

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H53369

FILED  
Jan 29, 2005  
Secretary of State

Entity Name: MCCARTHY AND ASSOCIATES, INC.

**Current Principal Place of Business:**

2555 NURSERY ROAD  
SUITE 101  
CLEARWATER, FL 33764 US

**New Principal Place of Business:**

**Current Mailing Address:**

2555 NURSERY ROAD  
SUITE 101  
CLEARWATER, FL 33764 US

**New Mailing Address:**

FEI Number: 59-2520470      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOVELACE, WILLIAM MR.  
401 LINCOLN AVE  
CLEARWATER, FL 33756 US

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

LOVELACE, WILLIAM MR.  
401 S. LINCOLN AVE  
CLEARWATER, FL 33756 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:

Electronic Signature of Registered Agent

01/29/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MCCARTHY, E. MICHAEL,  
Address: 1011 WEATHERSFIELD DRIVE  
City-St-Zip: DUNEDIN, FL 34698

Title: V ( ) Delete  
Name: SALEMME, JEFFREY J,  
Address: 1609 HAMPTON LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MCCARTHY, E. MICHAEL PRESID  
Address: 1011 WEATHERSFIELD DRIVE  
City-St-Zip: DUNEDIN, FL 34698 US

Title: V (X) Change ( ) Addition  
Name: SALEMME, JEFFREY J  
Address: 1609 HAMPTON LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: V ( ) Change (X) Addition  
Name: SELINSKY, ROBERT J  
Address: 23 NW 17TH STREET  
City-St-Zip: DELRAY BEACH, FL 33444 US

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: E. MICHAEL MCCARTHY

Electronic Signature of Signing Officer or Director

P

01/29/2005

Date