## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J36239

Address:

City-St-Zip:

FILED Mar 19, 2009 Secretary of State

Entity Name: M. PETE MCNABB, INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	N CENTER P ON, FL 34202				
Current M	ailing Addres	ss:	New Mailing Address	New Mailing Address:	
	N CENTER P ON, FL 34202				
FEI Number:	59-2735509	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MCNABB, M. PETE 9415 TOWN CENTER PKWY SARASOTA, FL 34202 US				MCNABB, M. PETE 9415 TOWN CENTER PKWY BRADENTON, FL 34202 US	
	named entity see of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: M. PETE MCNABB				03/19/2009	
	Electror	ic Signature of Registered Ag	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO ( ) MCNABB, M. P 9415 TOWN CE BRADENTON, I	ENTER PKWY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	P ( ) NELSON, DERI 9415 TOWN CE BRADENTON, I	ENTER PKWY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () NELSON, CHRI 9415 TOWN CE BRADENTON, I	ENTER PKWY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V/S ( ) VOLLMER, DA\ 9415 TOWN CE BRADENTON, I	ENTER PKWY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	V ()	Delete PH R	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DAWN P. VOLLMER ٧ 03/19/2009

9415 TOWN CENTER PARKWAY

BRADENTON, FL 34202