

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J60786

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** MCFARLAND, GOULD, LYONS, SULLIVAN & HOGAN, P.A.

**Current Principal Place of Business:**

311 S MISSOURI AVE  
CLEARWATER, FL 33756 US

**New Principal Place of Business:**

**Current Mailing Address:**

311 S MISSOURI AVE  
CLEARWATER, FL 33756 US

**New Mailing Address:**

**FEI Number:** 59-2779995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCFARLAND, DONALD O.  
311 S. MISSOURI AVENUE  
CLEARWATER, FL 33516 US

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

MCFARLAND, DONALD O.  
311 S. MISSOURI AVENUE  
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:

01/14/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCFARLAND, DONALD  
Address: 311 S. MISSOURI AVE.  
City-St-Zip: CLEARWATER, FL 33756

Title: VPSD  
Name: LYONS, GARY W.  
Address: 311 S. MISSOURI AVE.  
City-St-Zip: CLEARWATER, FL 33756

Title: VPTD  
Name: SULLIVAN, C.A.  
Address: 311 S. MISSOURI AVENUE  
City-St-Zip: CLEARWATER, FL 33756

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: GARY W LYONS

VPSD

01/14/2010

Electronic Signature of Signing Officer or Director

Date