

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L00978

**FILED**  
**Jan 19, 2005**  
**Secretary of State**

**Entity Name:** MCDARGH REAL ESTATE SERVICES, INC.

**Current Principal Place of Business:**

10006 N. DALE MABRY HWY  
204  
TAMPA, FL 33618 US

**New Principal Place of Business:**

**Current Mailing Address:**

10006 N. DALE MABRY HWY, STE. 204  
TAMPA, FL 33618 US

**New Mailing Address:**

10006 N. DALE MABRY HWY  
204  
TAMPA, FL 33618 US

**FEI Number:** 59-2960165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDARGH, SARA P.  
5035 PALOMA DRIVE  
TAMPA, FL 33624 US

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

MCDARGH, SARA P.  
5035 PALOMA DRIVE  
TAMPA, FL 33624 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: SARA P. MCDARGH

01/19/2005

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MCDARGH, SARA P.,  
Address: 5035 PALOMA DRIVE  
City-St-Zip: TAMPA, FL

Title: VP ( ) Delete  
Name: SMITH, CARRIE  
Address: 15321 BEAR CREEK DRIVE  
City-St-Zip: TAMPA, FL 33624

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

Title: D (X) Change ( ) Addition  
Name: MCDARGH, SARA P  
Address: 5035 PALOMA DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: VP (X) Change ( ) Addition  
Name: O'DONNELL, KAREN  
Address: 4018 BRAESGATE LANE  
City-St-Zip: TAMPA, FL 33624

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: SARA P. MCDARGH

D

01/19/2005

Electronic Signature of Signing Officer or Director

Date