

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L29982

1. Entry Name
MCCLUSKEY REALTY, INC.



Principal Place of Business
400 ST ANDREWS BLVD
MELBOURNE, FL 32940

Mailing Address
400 ST ANDREWS BLVD
MELBOURNE, FL 32940

FILED
Jul 25, 2008 08:00 AM
Secretary of State



07222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2978777	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCCLUSKEY, BETTY S
400 ST ANDREW BLVD
MELBOURNE, FL 32940

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE: _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MCCLUSKEY, BETTY S
STREET ADDRESS	400 ST ANDREW BLVD
CITY- ST- ZIP	MELBOURNE, FL 32940

TITLE	VD
NAME	WALKER, PATRICIA
STREET ADDRESS	400 ST ANDREW BLVD
CITY- ST- ZIP	MELBOURNE, FL 32940

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000956371
07/25/08-80005-012 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty S Mccluskey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-22-08
Date

Daytime Phone #