2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2008
Secretary of State

DOCUMENT# N93000001787

Entity Name: MCCLUSKY ENTERPRISES, INC.

Current Principal Place of Business:

110 LITHIA PINECREST RD
SUITE B
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

110 LITHIA PINECREST RD
SUITE B
BRANDON, FL 33511 US

New Mailing Address:

FEI Number: 59-3181989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THOMAS J. MCCLUSKY
110 LITHIA PINECREST RD
SUITE B
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCCLUSKY, THOMAS J
Address: 4334 SWIFT CIRCLE
City-St-Zip: VALRICO, FL

Title: D ( ) Delete
Name: MCCLUSKY, NANCY
Address: 4334 SWIFT CIRCLE
City-St-Zip: VALRICO, FL

Title: D ( ) Delete
Name: NORTHUP, KIMBERLY
Address: 4334 SWIFT CIRCLE
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: MCCLUSKY, JOSEPH B
Address: 200 N 52ND AVE
City-St-Zip: HOLLYWOOD, FL

Title: D ( ) Delete
Name: MCCLUSKY, ELIZABETH
Address: 200 N 52ND AVE
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MCCLUSKY, THOMAS J
Address: 4334 SWIFT CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: D (X) Change ( ) Addition
Name: MCCLUSKY, NANCY
Address: 4334 SWIFT CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: D (X) Change ( ) Addition
Name: NORTHUP, KIMBERLY
Address: 4334 SWIFT CIRCLE
City-St-Zip: VALRICO, FL 33596

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY MCCLUSKY D 08/25/2008
Electronic Signature of Signing Officer or Director — Date