

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000025153

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** MCCORQUODALE TRANSFER OF FLORIDA, INC.

**Current Principal Place of Business:**

110 WISE AVE  
SUITE 3  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 724  
NICEVILLE, FL 32588

**New Mailing Address:**

**FEI Number:** 26-1363937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FREDERIC, LISA M  
110 WISE AVE  
APT #3  
NICEVILLE, FL 32578 US

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

FREDERIC, LISA M  
110 WISE AVE  
UNIT 3  
NICEVILLE, FL 32578 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:**

01/12/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** PS  
**Name:** FREDERIC, LISA M  
**Address:** 110 WISE AVE., STE 3  
**City-St-Zip:** NICEVILLE, FL 32579

**Title:** V  
**Name:** FREDERIC, MICHAEL SHANE  
**Address:** 110 WISE AVE., STE 3  
**City-St-Zip:** NICEVILLE, FL 32579

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:** LISA FREDERIC

PRES

01/12/2010

Electronic Signature of Signing Officer or Director

Date