

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000023415

Entity Name: DIANNE E. MCCOY, INC.

**FILED**  
**Jan 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1913 RETREAT DR  
MECHANICSVILLE, VA 23111

**New Principal Place of Business:**

1913 RETREAT DR  
MECHANICSVILLE, VA 23111 US

**Current Mailing Address:**

1913 RETREAT DR  
MECHANICSVILLE, VA 23111

**New Mailing Address:**

1913 RETREAT DR  
MECHANICSVILLE, VA 23111 US

FEI Number: 36-4490996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCWILLIAMS, DONNA M  
2268 GARDEN CHASE DR.  
LAKELAND, FL 33812 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: DPST  
Name: MCCOY, DIANNE E  
Address: 1913 RETREAT DR  
City-St-Zip: MECHANICSVILLE, VA 23111

Title: VP  
Name: MCCOY, RAYMOND E  
Address: 1913 RETREAT DR  
City-St-Zip: MECHANICSVILLE, VA 23111 US

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: DIANNE E MCCOY

DPST

01/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date