

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047245

FILED  
Jul 10, 2009  
Secretary of State

Entity Name: MCCALLA ENTERPRISES, INC.

## Current Principal Place of Business:

5300 45TH STREET  
SUITE B  
WEST PALM BEACH, FL 33407

## Current Mailing Address:

801 NORTH F STREET  
LAKE WORTH, FL 33460

FEI Number: 36-4495961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCALLA, VICTORIA  
801 NORTH F STREET  
LAKE WORTH, FL 33460 US

## New Principal Place of Business:

5300 45TH STREET  
SUITE B  
WEST PALM BEACH, FL 33407 US

## New Mailing Address:

5300 45TH STREET  
SUITE B  
WEST PALM BEACH, FL 33407 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

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPVS ( ) Delete  
Name: MCCALLA, VICTORIA  
Address: 801 NORTH F STREET  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change ( ) Addition  
Name: MCCALLA, VICTORIA  
Address: 801 NORTH F STREET  
City-St-Zip: LAKE WORTH, FL 33460 US

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

SIGNATURE: VICTORIA MCCALLA

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07/10/2009

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

\_\_\_\_\_ Date