

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070831

Entity Name: MCKEAN CHARTERED.

FILED  
Apr 23, 2005  
Secretary of State

## Current Principal Place of Business:

1909 ROBINHOOD STREET  
SARASOTA, FL 34231

## New Principal Place of Business:

5531 MARQUESAS CIRCLE  
SARASOTA, FL 34233

## Current Mailing Address:

1909 ROBINHOOD STREET  
SARASOTA, FL 34231

## New Mailing Address:

5531 MARQUESAS CIRCLE  
CIRCLE, FL 34233

FEI Number: 16-1615483

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCKEAN, LISA H  
1909 ROBINHOOD STREET  
SARASOTA, FL 34231 US

## Name and Address of New Registered Agent:

MCKEAN, LISA H  
5531 MARQUESAS CIRCLE  
SARASOTA, FL 34233 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:

04/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCKEAN, LISA H  
Address: 1909 ROBINHOOD STREET  
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete  
Name: MCKEAN, PAUL  
Address: 1909 ROBINHOOD STREET  
City-St-Zip: SARASOTA, FL 34231

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MCKEAN, LISA H  
Address: 5531 MARQUESAS CIRCLE  
City-St-Zip: SARASOTA, FL 34233

Title: D (X) Change ( ) Addition  
Name: MCKEAN, PAUL  
Address: 5531 MARQUESAS CIRCLE  
City-St-Zip: SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LISA H. MCKEAN

D

04/23/2005

Electronic Signature of Signing Officer or Director

Date