

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126408

Entity Name: MCLELLAN AVIARY, INC.

FILED  
Apr 11, 2009  
Secretary of State

## Current Principal Place of Business:

10131 HARVEARD RD.  
MILTON, FL 32520

## New Principal Place of Business:

## Current Mailing Address:

10131 HARVEARD RD.  
MILTON, FL 32520

## New Mailing Address:

FEI Number: 81-0584893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RENEE TEMPLE, DONNA  
10131 HAVEARD RD  
MILTON, FL 32570 US

## Name and Address of New Registered Agent:

TEMPLE, DONNA R P  
10131 HAVEARD RD  
MILTON, FL 32570 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: DONNA R. TEMPLE PRESIDENT

04/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TEMPLE, JOHN M  
Address: 10131 HAVEARD RD  
City-St-Zip: MILTON, FL 32520

Title: DP ( ) Delete  
Name: TEMPLE, DONNA R  
Address: 10131 HAVEARD RD.  
City-St-Zip: MILTON, FL 32520

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: TEMPLE, JOHN M VP  
Address: 10131 HAVEARD RD  
City-St-Zip: MILTON, FL 32520

Title: P (X) Change ( ) Addition  
Name: TEMPLE, DONNA R PRES  
Address: 10131 HAVEARD RD.  
City-St-Zip: MILTON, FL 32520

Title: T ( ) Change (X) Addition  
Name: TEMPLE, DONNA R T  
Address: 10131 HAVEARD ROAD  
City-St-Zip: MILTON, FL 32570

Title: S ( ) Change (X) Addition  
Name: TEMPLE, JOHN M S  
Address: 10131 HAVEARD ROAD  
City-St-Zip: MILTON, FL 32570

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: DONNA R. TEMPLE

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

Date