

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000152637

Entity Name: MAX CLELAND, INC.

**FILED**  
**Mar 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

918 GILFORD STREET  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

918 GILFORD STREET  
OLDSMAR, FL 34677

**New Mailing Address:**

FEI Number: 20-0503600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBERT F. DIMARCO CPA , PA  
3444 EAST LAKE ROAD  
SUITE 412  
PALM HARBOR, FL 34685 US

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

ROBERT F. DIMARCO CPA , PA  
220 N PINE AVE  
SUITE A  
OLDSMAR, FL 34677 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

03/19/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CLELAND, MAX R  
Address: 918 GILFORD STREET  
City-St-Zip: OLDSMAR, FL 34677 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: MAX R CLELAND

PRES

03/19/2011

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

\_\_\_\_\_  
Date