

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 17, 2007 8:00 am**  
**Secretary of State**

07-17-2007 90108 004 \*\*\*158.75

**DOCUMENT # P04000000645**



1. Entity Name  
**RUBINO & MCGEEHIN CONSULTING GROUP, INC.**

Principal Place of Business  
**1201 HAYS ST  
TALLAHASSEE, FL 32301**

Mailing Address  
**3560 S. OCEAN BLVD.  
#909  
S. PALM BEACH, FL 33480**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07122007

Chg-P

CR2E034 (12/06)

4. FEI Number

**52-2289201**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYES ST  
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE PCD ☐ Delete  
NAME MCGEEHIN, PATRICK A  
STREET ADDRESS 3560 S. OCEAN BOULEVARD #909  
CITY-ST-ZIP SOUTH PALM BEACH, FL 33480

TITLE VD ☐ Delete  
NAME RUBINO, LOUIS J  
STREET ADDRESS 6905 ROCKLEDGE DRIVE  
CITY-ST-ZIP BETHESDA, MD 20817

TITLE S ☐ Delete  
NAME SUNTUM, MOIRA  
STREET ADDRESS 6905 ROCKLEDGE DRIVE  
CITY-ST-ZIP BETHESDA, MD 20817

TITLE T ☐ Delete  
NAME BENNETT, BARBARA A  
STREET ADDRESS 6905 ROCKLEDGE DRIVE  
CITY-ST-ZIP BETHESDA, MD 20817

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 6903 Rockledge Drive, Suite 1200  
CITY-ST-ZIP Bethesda, MD 20817

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 6903 Rockledge Drive, Suite 1200  
CITY-ST-ZIP Bethesda, MD 20817

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Moira Suntum Moira Suntum, Secretary  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-07

301-564-3636

Date

Daytime Phone #