## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 17, 2008 08:00 A Secretary of State

ANNUAL REPORT				Secretary of St			
DOCUMENT # P04000015224						Secretar	y or St
1. Entity Nan	<sup>ne</sup> MCKEAN, INC.			i e			
OAKKI	VIOREZUA, IIVO.						
Drive year Dive	ce of Business	Mailing Address	( to 10)				
4727 INDIA		4727 INDIAN GAP DR					
ORLANDO, F		ORLANDO, FL 32812					
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				4. FEI Number 20-115			Not Applicable
				5. Certificate	of Status Desired	□ \$8.75 Fee Req	Additional
<u> </u>	6. Name and Address of Current Re				ngkartaran asar ing pi <sub>g</sub> asa		
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MCKEAN, GARRY 4727 INDIAN GAP DR				DO	NOIW	/RITE	in ( in 1. majorajo de ) in (
ORLANDO	D, FL 32812			*** *** * * ***** * ******	THIS SF	- 60 (60 M ) 10 M (60 M	en versenister in Mariero d'ordinos
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8 The above	e named entity submits this statement for th	e numose of changing its registe				. est le 138 / set les l orida : Lam familiar w	
	lions of registered agent.	a purpose of changing its registe	area conce or register	co agom, or co.	in, in the oldie of the		All, allo doopx
SIGNATURE.							
	Signature, typed or printed name of registered agent and	itle if applicable. (NOTE: Registe	red Agent signature required	when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00	Election Campaign Final Trust Fund Contribution		00 May Be			
	ay 1, 2008 Fee will be \$550.00				<del></del>		
10.	OFFICERS AND DIF	RECTORS		ar, san parament Sida san ang	SK 17999 1993 (Agir Laga). Kalindan Andron Taban (Adir	Springer programs Programs	Markey (187) Markey (187)
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			<ul> <li>**** Department</li> </ul>	angai ee Kab	o Janaani	s literak e labahati da	

12. Thereby certify that the information supplied with this filting 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sary McKen

GARRY MUKERN

4/5/08

(407) 380-5143