

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042762

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: MCCABE FAMILY ENTERTAINMENT, INC.

## Current Principal Place of Business:

14187 81ST AVENUE NORTH  
SEMINOLE, FL 33776

## New Principal Place of Business:

13799 PARK BLVD #315  
LARGO, FL 33776

## Current Mailing Address:

14187 81ST AVENUE NORTH  
SEMINOLE, FL 33776

## New Mailing Address:

13799 PARK BLVD #315  
LARGO, FL 33776

FEI Number: 20-0867372

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCABE, CRISTINA T  
14187 81ST AVENUE NORTH  
SEMINOLE, FL 33776 US

## Name and Address of New Registered Agent:

MCCABE, CRISTINA T  
13799 PARK BLVD #315  
SEMINOLE, FL 33776 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: CRISTINA T. MCCABE

04/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCCABE, CRISTINA T  
Address: 14187 81ST AVENUE NORTH  
City-St-Zip: SEMINOLE, FL 33776

Title: V ( ) Delete  
Name: MCCABE, STEVEN J  
Address: 14187 81ST AVENUE NORTH  
City-St-Zip: SEMINOLE, FL 33776

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCCABE, CRISTINA T  
Address: 13799 PARK BLVD #315  
City-St-Zip: SEMINOLE, FL 33776

Title: V (X) Change ( ) Addition  
Name: MCCABE, STEVEN J  
Address: 13799 PARK BLVD #315  
City-St-Zip: SEMINOLE, FL 33776

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: CRISTINA T. MCCABE

MRS.

04/18/2009

Electronic Signature of Signing Officer or Director

Date