## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143474

Entity Name: MCKENNA'S HOME REPAIR, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2300 TWELVE OAKS DR. 588 ROBERT LIVINGSTON ST. APT. C2 ORANGE PARK, FL 32073

ORANGE PARK, FL 32065

Current Mailing Address: New Mailing Address:

2300 TWELVE OAKS DR.

APT. C2

ORANGE PARK, FL 32065

588 ROBERT LIVINGSTON ST.

ORANGE PARK, FL 32073

FEI Number: 86-1119204 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MCKENNA, MICHAEL C
2300 TWELVE OAKS DR.

APT. C2
ORANGE PARK, FL 32065 US

MCKENNA, MICHAEL C
588 ROBERT LIVINGSTON ST.
ORANGE PARK, FL 32073 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: MICHAEL C MCKENNA 04/13/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition MCKENNA, MICHAEL C MCKENNA, MICHAEL C Name: Name: 2300 TWELVE OAKS DR. APT. C2 588 ROBERT LIVINGSTON ST. Address: Address: City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: ORANGE PARK, FL 32073

Title: STD () Delete Title: STD (X) Change () Addition Name: MCKENNA, JENNIFER R Name: MCKENNA, JENNIFER R

Name:MCKENNA, JENNIFER RName:MCKENNA, JENNIFER RAddress:2300 TWELVE OAKS DR. APT. C2Address:588 ROBERT LIVINGSTON ST.City-St-Zip:ORANGE PARK, FL 32065City-St-Zip:ORANGE PARK, FL 32073

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: MICHAEL C MCKENNA P 04/13/2009