

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000127655

Entity Name: MALLORY & MCCALL INC

FILED  
Apr 27, 2011  
Secretary of State

**Current Principal Place of Business:**

4915 RATTLESNAKE HAMMOCK RD #139  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

4915 RATTLESNAKE HAMMOCK RD #139  
NAPLES, FL 34113

**New Mailing Address:**

FEI Number: 26-1483901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRINKMAN, BOB  
362 PINEHURST CIRCLE  
NAPLES, FL 34113 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GELLER, MALLORY  
Address: 4915 RATTLESNAKE HAMMOCK RD #139  
City-St-Zip: NAPLES, FL 34113 US

Title: VP  
Name: MCCALL GELLER, JAN  
Address: 4915 RATTLESNAKE HAMMOCK RD #139  
City-St-Zip: NAPLES, FL 34113 US

Title: TMP  
Name: BRINKMAN, BOB  
Address: 4915 RATTLESNAKE HAMMOCK RD #139  
City-St-Zip: NAPLES, FL 34113 US

Title: S  
Name: BRINKMAN, JENNIFER  
Address: 4915 RATTLESNAKE HAMMOCK RD #139  
City-St-Zip: NAPLES, FL 34113 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: JENNIFER BRINKMAN

S

04/27/2011

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

\_\_\_\_\_  
Date