

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000067832

**Entity Name:** MCAULIFFE INVESTMENTS, INC.

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

21724 MASTERS CIRCLE  
ESTERO, FL 33928

**New Principal Place of Business:**

**Current Mailing Address:**

PO DRAWER 60205  
FT MYERS, FL 33906

**New Mailing Address:**

PO DRAWER 60205  
FORT MYERS, FL 33906

**FEI Number:** 27-0725846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WICKER, JOHN M ESQ  
12670 NEW BRITTANY BLVD SUITE 101  
FT MYERS, FL 33907 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: DP  
Name: MCAULIFFE, CHRISTIAN S  
Address: 21724 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928

Title: DST  
Name: MCAULIFFE, MARILYN B  
Address: 21724 MASTERS CIRCLE  
City-St-Zip: ESTERO, FL 33928

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: CHRISTIAN S. MCAULIFFE

DP

03/30/2011

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

\_\_\_\_\_  
Date