

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000041513

Entity Name: DAN MC CULLERS, INC.

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

12087 62 ST N  
UNIT #5  
LARGO, FL 33773

**New Principal Place of Business:**

**Current Mailing Address:**

876 BAY POINT DE  
MADEIRA BEACH, FL 33708 US

**New Mailing Address:**

FEI Number: 59-3183164

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALL FLORIDA FIRM, INC.  
465 S VOLUSIA AV, SUITE C  
ORANGE CITY, FL 32763 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MC CULLERS, DANIEL  
Address: 876 BAY POINT DRIVE  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: VP  
Name: MCCULLERS, CONNIE  
Address: 876 BAY POINT DR.  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: TS  
Name: MCCULLERS, TIMOTHY  
Address: 4323 37TH ST NORTH  
City-St-Zip: ST PETE, FL 33714

Title: AT  
Name: MCCULLERS, CONNIE  
Address: 876 BAY POINT DR  
City-St-Zip: MADEIRA BEACH, FL 33708

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: CONNIE MCCULLERS

VP

03/10/2010

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

\_\_\_\_\_  
Date