

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000043860

Entity Name: MCLEAN INDUSTRIAL MAINTENANCE, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

4475 CYPRESS COUNTRY LN
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1066
LAKELAND, FL 33802 US

New Mailing Address:

FEI Number: 59-2350148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDEN, CLAUDE M III
1 LAKE MORTON DRIVE
LAKELAND, FL 33802 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: P () Delete
Name: MCLEAN, NEIL A
Address: 4475 CYPRESS COUNTRY LN
City-St-Zip: LAKELAND, FL 33801

Title: VP () Delete
Name: MCLEAN, NEIL B
Address: 3313 CARLISLE
City-St-Zip: FORT MILL, SC 29715

Title: VP () Delete
Name: MCLEAN, COLIN J
Address: 1620 CHIPPEWA TR.
City-St-Zip: MAITLAND, FL 32751

Title: VP () Delete
Name: MCLEAN, DARLA K
Address: 3313 CARLISLE
City-St-Zip: FORT MILL, SC 29715

Title: S () Delete
Name: MCLEAN, JOEELLEN
Address: 1620 CHIPPEWA TR
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NEIL A. MCLEAN

PRES

01/21/2009

Electronic Signature of Signing Officer or Director

_____ Date