

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000062245

Entity Name: 2495 MCCALL ROAD CORP.

FILED  
Feb 10, 2009  
Secretary of State

## Current Principal Place of Business:

2495 MCCALL RD  
ENGLEWOOD, FL 34224

## New Principal Place of Business:

5309 29TH STREET EAST  
ELLENTON, FL 34222

## Current Mailing Address:

5309 29TH ST. EAST  
ELLENTON, FL 34222 US

## New Mailing Address:

FEI Number: 65-0531422

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAPLAN, MARVIN  
50 CENTRAL AVE.  
UNIT 178  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

KAPLAN, MARVIN  
50 CENTRAL AVE.  
#1702  
SARASOTA, FL 34236 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: MARVIN KAPLAN

02/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KAPLAN, MARVIN  
Address: P.O. BOX 49586  
City-St-Zip: SARASOTA, FL 34230

Title: S ( ) Delete  
Name: MILLARD, KEVIN  
Address: 8317 EAGLE LAKE DRIVE  
City-St-Zip: SARASOTA, FL 34241

Title: T ( ) Delete  
Name: CABRAL, SHAWN  
Address: 4444 CENTER GATE BLVD.  
City-St-Zip: SARASOTA, FL 34233

## 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:

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: SHAWN CABRAL

T

02/10/2009

Electronic Signature of Signing Officer or Director

Date