

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000079480

Entity Name: MCCRAVY & ASSOCIATES, INC.

FILED  
Jun 22, 2009  
Secretary of State

## Current Principal Place of Business:

6771 CYPRESS COVE CIR  
JUPITER, FL 33458 US

## New Principal Place of Business:

## Current Mailing Address:

6771 CYPRESS COVE CIR  
JUPITER, FL 33458 US

## New Mailing Address:

FEI Number: 65-0705595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCRAVY, LELAND  
6771 CYPRESS COVE CIRCLE  
MAILING 103 US HWY 1 STE F5158  
JUPITER, FL 33477 US

## Name and Address of New Registered Agent:

MCCRAVY, LELAND  
6771 CYPRESS COVE CIRCLE  
JUPITER, FL 33477 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:

Electronic Signature of Registered Agent

06/22/2009

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCCRAVY, LELAND E  
Address: 6771 CYPRESS COVE CIRCLE  
City-St-Zip: JUPITER, FL 33458

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LELAND MCCRAVY

P

06/22/2009

Electronic Signature of Signing Officer or Director

Date