

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000035960

FILED
Apr 28, 2005
Secretary of State

Entity Name: MCNAB & MCNAB ENTERPRISES, INC.

Current Principal Place of Business:

310 N COURTENAY PARKWAY
MERRITT ISLAND, FL 32953 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1230
FLAGLER BEACH, FL 32136

New Mailing Address:

FEI Number: 59-3513312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAS, JAMES M
1328 SOUTH AIA
P.O. BOX 1230
FLAGLER BEACH, FL 32136 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: D () Delete
Name: MCNAB, JAMES M
Address: 1328 SOUTH A1A
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D () Delete
Name: MCNAB, JAMES M JR.
Address: 519 STEEPLECHASE LANE
City-St-Zip: MELBOURNE, FL 32940

Title: DST () Delete
Name: STANTON, MARK P
Address: 3424 ST. JOHNS AVE
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: AYREY, CURTIS
Address: 1663 SILVERADO DR.
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: STAGLIANO, JOE
Address: 797 NASSAU RD.
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: HAMMOND, WADE
Address: 507 STEEPLE CHASE LN
City-St-Zip: MELBOURNE, FL 32940

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES M MCNAB

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date