

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001772

Entity Name: CTRE, INCORPORATED

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

6105 W. ST. JOE HWY, SUITE 200
SUITE 200
LANSING, MI 48917

New Principal Place of Business:

Current Mailing Address:

6105 W. ST. JOE HWY, SUITE 200
SUITE 200
LANSING, MI 48917

New Mailing Address:

FEI Number: 38-3573173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS INC.
300 FIFTH AVENUE SOUTH
SUITE 101-330
NAPLES, FL 34102 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: CPT () Delete
Name: TRATT, DAVID L
Address: 403 WINDYRUSH LANE
City-St-Zip: DEWITT, MI 48820

Title: VCS () Delete
Name: DEMANA, MARK A
Address: 9209 LOOKING GLASS BROOK ROAD
City-St-Zip: GRAND LEDGE, MI 48837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPT (X) Change () Addition
Name: TRATT, DAVID L PE
Address: 403 WINDYRUSH LANE
City-St-Zip: DEWITT, MI 48820

Title: VCS (X) Change () Addition
Name: DEMANA, MARK A PE
Address: 9209 LOOKING GLASS BROOK ROAD
City-St-Zip: GRAND LEDGE, MI 48837

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: DAVID TRATT

CPT

01/14/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date