

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G41715

FILED
Mar 24, 2009
Secretary of State

Entity Name: CONTINENTAL BROKERAGE, INC.

Current Principal Place of Business:

985 W. ST 206
P. O. BOX 4289
ST AUGUSTINE, FL 32085

New Principal Place of Business:

985 SR 206 W
ST AUGUSTINE, FL 32086

Current Mailing Address:

985 W. STATE ROAD 206
ST. AUGUSTINE, FL 32086 US

New Mailing Address:

985 STATE ROAD 206 W
ST. AUGUSTINE, FL 32086 US

FEI Number: 59-2392658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIANNINI, LEOPOLD
35 SANDPIPER BLVD.
ST AUGUSTINE, FL 32084 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: DP () Delete
Name: GIANNINI, LEOPOLD
Address: 35 SANDPIPER BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GIANNINI, LEOPOLDO
Address: 35 SANDPIPER BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

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: LEOPOLDO GIANNINI

DP

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date