

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 26, 2007 8:00 am
Secretary of State

01-26-2007 90029 045 ***150.00

DOCUMENT # P05000017802
1. Entity Name
CITB PROPERTIES INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 200 EXECUTIVE WAY	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

60007230

DO NOT WRITE IN THIS SPACE

City & State PONTE VEDRA BEACH, FL		City & State		4. FEI Number 05-0616842	Applied For <input type="checkbox"/> Not Applicable
Zip 32082	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name COOK, DANIEL P.	
Street Address (P.O. Box Number is Not Acceptable) 1008 OCEAN FRONT	
City NEPTUNE BEACH	FL Zip Code 32266

8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	------------------------------------

10. OFFICERS AND DIRECTORS		11.	
TITLE D	NAME COOK, DANIEL P.	TITLE	
STREET ADDRESS 1008 OCEAN FRONT	CITY-ST-ZIP NEPTUNE BEACH, FL 32266	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	DO NOT WRITE IN THIS SPACE
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **DANIEL P. COOK**  **1/17/07** **904 543-0303**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #