

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032979

FILED
Apr 30, 2009
Secretary of State

Entity Name: CTI PARTNERS, INC.

Current Principal Place of Business:

P. O. BOX 2132
HIGH SPRINGS, FL 32655

New Principal Place of Business:

P. O. BOX 5253
CLEARWATER, FL 33758

Current Mailing Address:

P. O. BOX 2132
HIGH SPRINGS, FL 32655

New Mailing Address:

P. O. BOX 5253
CLEARWATER, FL 33758

FEI Number: 55-0891285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGUIRE, JOHN P
1030 SW 101 STREET
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

MAGUIRE, JOHN P
726 PATRICIA AVENUE
DUNEDIN, FL 34698 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAGUIRE, JOHN P
Address: 1030 SW 101 STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: S () Delete
Name: MAGUIRE, JOHN P
Address: 1030 SW 101 STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: MAGUIRE, JOHN P
Address: 1030 SW 101 STREET
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAGUIRE, JOHN P
Address: 726 PATRICIA AVENUE
City-St-Zip: DUNEDIN, FL 34698

Title: S (X) Change () Addition
Name: MAGUIRE, JOHN P
Address: 726 PATRICIA AVENUE
City-St-Zip: DUNEDIN, FL 34698

Title: D (X) Change () Addition
Name: MAGUIRE, JOHN P
Address: 726 PATRICIA AVENUE
City-St-Zip: DUNEDIN, FL 34698

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: JOHN MAGUIRE

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date