2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P07000101878

Entity Name: CAPITAL GRANITE INC.

Current Principal Place of Business:

3337 DUPRE ST
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

Current Mailing Address:

3337 DUPRE ST
PORT CHARLOTTE, FL 33980

New Mailing Address:

FEI Number: 26-0888584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROZSYPALEK, LUKAS
3337 DUPRE ST
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

MCGILLEN II, TIMOTHY
3337 DUPRE ST
PORT CHARLOTTE, FL 33980 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: TIMOTHY J MCGILLEN 04/30/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROZSYPALEK, LUKAS
Address: 3337 DUPRE ST
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: S (X) Delete
Name: KOVARIK, PETR
Address: 3337 DUPRE ST
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VP (X) Delete
Name: MCGILLEN, TIMOTHY J
Address: 3337 DUPRE ST
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCGILLEN II, TIMOTHY
Address: 3337 DUPRE ST
City-St-Zip: PORT CHARLOTTE, FL 33980

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 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: TIMOTHY J MCGILLEN II PRES 04/30/2009
Electronic Signature of Signing Officer or Director Date