

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000103573

FILED
Feb 18, 2008
Secretary of State

Entity Name: CORPORATE CAPITAL RESOURCES OF FLORIDA, INC.

Current Principal Place of Business:

815 EYRIE DRIVE
SUITE B
OVIEDO, FL 32762 US

New Principal Place of Business:

Current Mailing Address:

815 EYRIE DRIVE
SUITE B
OVIEDO, FL 32762 US

New Mailing Address:

P.O. BOX 2602
OCALA, FL 34470 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

GRABE, JONATHAN E D
326 NE 43RD CT
OCALA, FL 34470 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: JONATHAN E GRABE

02/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRABE, JONATHAN E
Address: 815 EYRIE DRIVE SUITE B
City-St-Zip: OVIEDO, FL 32762 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRABE, JONATHAN E
Address: 326 NE 43RD CT
City-St-Zip: OCALA, FL 34470 US

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: JONATHAN E GRABE

D

02/18/2008

Electronic Signature of Signing Officer or Director

Date