

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052778

Entity Name: CSC PROPERTIES, INC.

FILED
Apr 17, 2007
Secretary of State

Current Principal Place of Business:

235 N. GARDEN AVE.
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

235 N. GARDEN AVE.
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 59-3397425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, JAMES L
235 N. GARDEN AVE
CLEARWATER, FL 33755 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: PSTD () Delete
Name: WALKER, JAMES
Address: 235 N GARDEN AVE
City-St-Zip: CLEARWATER, FL 33755

Title: VP () Delete
Name: WALKER, CHRISTINE
Address: 235 GARDEN AVE
City-St-Zip: CLEARWATER, FL 33755

Title: VP () Delete
Name: EDWARDS, JEAN
Address: 235 N GARDEN AVE
City-St-Zip: CLEARWATER, FL 33755

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC () Change (X) Addition
Name: OBERSCHALL, DEREK
Address: 235 N GARDEN AVE
City-St-Zip: CLEARWATER, FL 33755

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES L WALKER

PSTD

04/17/2007

Electronic Signature of Signing Officer or Director

Date