2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYP

OF RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 04, 2008 8:00 am Secretary of State DOCUMENT # P99000058735 04-04-2008 90022 047 ***150.00 1. Entity Name CSRSI, INC. Principal Place of Business Mailing Address 2671 SW PORT ST. LUCIE BLVD. 2671 SW PORT ST. LUCIE BLVD. PORT ST. LUCIE, FL 34953 PORT ST. LUCIE, FL 34953 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 830 NE Pop Tilton Pl830 NE Pop Tilton Place 01182008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For Jensen Beach, 65-0940017 Not Applicable <u>Jensen Beach,</u> Country Zìp \$8.75 Additional 5. Certificate of Status Desired 34957 USA 34957 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FEDERGREEN, SUSAN Street Address (P.O. Box Number is Not Acceptable) 2328 GINGER TERRACE JENSEN BEACH, FL 34957 City Zip Code FL 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be \Box After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE Change Addition HEROUX, RICHARD W NAME NAME STREET ADDRESS 2671 SW PORT ST. LUCIE BLVD. STREET ADDRESS CITY-ST-ZIP PORT ST. LUCIE, FL 34953 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME FEDERGREEN, WARREN NAME STREET ADDRESS 2671 SW PORT ST. LUCIE BLVD. STREET ADDRESS CITY-ST-ZIP PORT ST. LUCIE, FL 34953 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HEROUX, ELSA H STREET ADDRESS 656 SE CAPON TERRACE STREET ADDRESS CITY-ST-ZIP PORT SAINT LUCIE, FL 34983 CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition FEDERGREEN, SUSAN NAME NAME STREET ADDRESS 2328 GINGER TERRACE STREET ADDRESS CITY~ST-ZIP JENSEN BEACH, FL 34957 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

772-225-00*6*7

Daysime Phone #