

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000093088

FILED
May 09, 2007
Secretary of State

Entity Name: CERTIFIED TECH TRAINERS, INC.

Current Principal Place of Business:

10172 SANDY MARSH CIR
ORLANDO, FL 32832

New Principal Place of Business:

1004 GREEN PINE CIRCLE
ORANGE PARK, FL 32065

Current Mailing Address:

10172 SANDY MARSH CIR
ORLANDO, FL 32832

New Mailing Address:

1004 GREEN PINE CIRCLE
ORANGE PARK, FL 32065

FEI Number: 59-3607521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, STEVEN W
8200 BRYAN DIARY RD
SUITE 300
LARGO, FL 33777 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KEELE, ALLEN V
Address: 10172 SANDY MARSH CIR
City-St-Zip: ORLANDO, FL 32832

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KEELE, ALLEN V
Address: 1004 GREEN PINE CIRCLE
City-St-Zip: ORANGE PARK, FL 32065

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: ALLEN V. KEELE

P

05/09/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date