## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000030774

Entity Name: CBD TRAINING, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
425 22ND AVE N, SUITE D ST. PETERSBURG, FL 33702				425 22ND AVE N, SUITE D ST. PETERSBURG, FL 33704	
Current N	lailing Addres	s:	New Mailing Address:		
425 22ND AVE N, SUITE D ST. PETERSBURG, FL 33702			425 22ND AVE N, SUITE D ST. PETERSBURG, FL 33704		
FEI Number	: 59-3568942	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	AROL B SAS AVE., N.E RSBURG, FL				
The above in the State	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D ( ) DAVIS, CAROL 1948 KANSAS ST. PETERSBU	AVE., N.E.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/P ( ) DAVIS, PERRY 1948 KANSAS / ST. PETERSBU	AVE., N.E.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/V ( ) WILSON, JON 4937 DOVER S ST. PETERSBU	TREET, N.E.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/V ( ) DAVIS, PHILLIF 216 16TH AVEN ST PETERSBU	IUE NE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JON ERIC WILSON D/V 01/20/2009