

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 148029

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: CAPITAL SQUARE BUILDING INC.

**Current Principal Place of Business:**

700 N CALHOUN ST  
SUITE B-4  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

700 N CALHOUN ST  
SUITE B-4  
TALLAHASSEE, FL 32303

**New Mailing Address:**

FEI Number: 59-0551288      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOANOS, PAUL E  
3120 FIELDSTONE LN.  
TALLAHASSEE, FL 32308      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: V      ( ) Delete  
Name: JOANOS, KALLIOPI S.  
Address: 626 VONCILE AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: P      ( ) Delete  
Name: JOANOS, PAUL E.  
Address: 3120 FIELDSTONE LANE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S      ( ) Delete  
Name: KYPRROS, STANLEY T  
Address: 1500 S. MERIDIAN ST  
City-St-Zip: TALLAHASSEE, FL 32302

Title: D      ( ) Delete  
Name: JOANOS, STAMATIA  
Address: 1417 GOODWOOD COURT  
City-St-Zip: TALLAHASSEE, FL 32308

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

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: PAUL E. JOANOS

P

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date