2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # 269237

C A C INVESTMENTS INC



FILED Jan 11, 2008 08:00 Al Secretary of State

Principal Place of Business

141 5TH STREET, N.W.

#300

WINTER HAVEN, FL 33881

Mailing Address

P.O. BOX 7608

WINTER HAVEN, FL-33833



01092008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1113206 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CURTIS, CLINTON A. 141 5TH STREET, N.W. WINTER HAVEN, FL 33881

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8. The above the obliga	e named entity submits this statement for the particles of registered agent.	ourpose of changing its registered	office or r	egistered agent, or b	ooth, in the State of Florida. I am familiar with, and acc	:ept
SIGNATURE	Signature, typed or printed name of registered agent and title	ıf applicable. (NOTE: Registered A	gent signature	a required when reinstating)	DATE	,
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financi Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	,	4-
10.	OFFICERS AND DIREC	CTORS "				
TITLE NAME STREET ADDRESS CHTY-ST-ZIP	VD CURTIS, FLORENCE S 1950 NORTH SCENIC HIGHWAY BABSON PARK, FL 33827				U00000779498 01/11/08-80041-002 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SINGLETARY, TEDDIE B 141 5TH STREET, N.W. WINTER HAVEN, FL 33881					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CURTIS, CLINTON A 141 5HT STREET, N.W. WINTER HAVEN, FL 33881			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-SI-ZIP						

12. Thereby 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.

SIGNATURE: