2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 269237

Entity Name: CACINVESTMENTS INC

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

141 5TH STREET, N.W. 100 W. STUART AVENUE #300 LAKE WALES, FL 33853 US

WINTER HAVEN, FL 33881

New Mailing Address: Current Mailing Address:

P.O. BOX 7608 P.O. BOX 1079

WINTER HAVEN, FL 33833 LAKE WALES, FL 33853 US

FEI Number: 59-1113206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CURTIS, CLINTON A. CURTIS, CLINTON A 141 5TH STREET, N.W. 100 W. STUART AVENUE US US WINTER HAVEN, FL 33881 LAKE WALES, FL 33853

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: CLINTON A. CURTIS 03/10/2009

> Electronic Signature of Registered Agent Date

> > Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

WINTER HAVEN, FL 33881

OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

LAKE WALES, FL 33853 US

Title: () Delete Title: (X) Change () Addition CURTIS, FLORENCE S, CURTIS, FLORENCE S Name: Name: 1950 NORTH SCENIC HIGHWAY 1950 NORTH SCENIC HIGHWAY Address: Address:

City-St-Zip: BABSON PARK, FL 33827 City-St-Zip: BABSON PARK, FL 33827 US

Title: Title: (X) Change () Addition () Delete Name: SINGLETARY, TEDDIE B, Name: SINGLETARY, TEDDIE B, 141 5TH STREET, N.W. 990 KEEN ROAD

FROSTPROOF, FL 33843 US WINTER HAVEN, FL 33881 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: PD () Delete PD

CURTIS, CLINTON A, Name: CURTIS, CLINTON A Name: 141 5HT STREET, N.W. 100 W. STUART AVENUE Address: Address:

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: TEDDIE B. SINGLETARY SD 03/10/2009

Electronic Signature of Signing Officer or Director

Date