

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 333784

Entity Name: CARBONNEAU INC

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

6348 S.W. 2 ST.
MARGATE, FL 33068

New Principal Place of Business:

Current Mailing Address:

6348 S.W. 2 ST.
MARGATE, FL 33068

New Mailing Address:

FEI Number: 62-0811411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGESS, CA
6348 S.W. 2ND STREET
MARGATE, FL 33068 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: DPST () Delete
Name: BURGESS, C.A.
Address: 6348 SW 2ND STREET
City-St-Zip: MARGATE, FL

Title: S () Delete
Name: BURGESS, C A,
Address: 6348 S W 2 ST
City-St-Zip: MARGATE, FL 00000,

Title: V (X) Delete
Name: BURGESS SAMUEL,
Address: 6348 SW 2 ST
City-St-Zip: MARGATE, FL

Title: AVP (X) Delete
Name: BURGESS, MELANIE
Address: 8993 NW 20 MANOR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: AVP (X) Delete
Name: JOHNSTON, YVONNE
Address: 6355 SW 2 STREET
City-St-Zip: MARGATE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: BURGESS, C.A.
Address: 6348 SW 2ND STREET
City-St-Zip: MARGATE, FL 33068

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: CA BURGESS

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date