

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 647446

FILED
Oct 04, 2005
Secretary of State**Entity Name:** CVC & ASSOCIATES, INC.**Current Principal Place of Business:**4455 DARDANELLE DR.
D
ORLANDO, FL 32808 US**New Principal Place of Business:****Current Mailing Address:**4455 DARDANELLE DR.
D
ORLANDO, FL 32808 US**New Mailing Address:****FEI Number:** 59-2661569**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HILLMAN, RANDY
203 E HILLCREST ST
ORLANDO, FL 32801 US**Name and Address of New Registered Agent:**LILLY, ROBERT C
4455 DARDANELLE DRIVE
SUITE D
ORLANDO, FL 32808 US

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: ROBERT LILLY

10/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COOK, CRAIG
Address: 4455 DARDANELLE DR., #D
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: COOK, WELBORN
Address: 4455 DARDANELLE DR #D
City-St-Zip: ORLANDO, FL 32808

Title: TD () Delete
Name: LILLY, ROBERT
Address: 4455 DARDANELLE DR #D
City-St-Zip: ORLANDO, FL 32808

Title: VD () Delete
Name: CULLISON, MARK
Address: 4455 DARDANELLE DR #D
City-St-Zip: ORLANDO, FL 32808

Title: SD () Delete
Name: CYRUS, COX
Address: 4455 DARDANELLE DR #D
City-St-Zip: ORLANDO, FL 32808

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT C. LILLY

TD

10/04/2005

Electronic Signature of Signing Officer or Director

Date