2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 655008

FILED Jul 01, 2008 Secretary of State

Entity Name: CS CAPITAL STRATEGIES FINANCIAL GROUP, INC.

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

300 SOUTH ORANGE AVE #1100 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

300 SOUTH ORANGE AVE #1100 ORLANDO, FL 32801

FEI Number: 59-1969645 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:

CUFF, SHERI

1486 GRACE CIRCLE

LONGWOOD, FL 32750 US

CUFF, SHERI

300 S. ORANGE AVE

1100

ORLANDO, FL 32812 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.

in the State of Florida.

SIGNATURE: SHERI CUFF 07/01/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition PRFS () Delete Title: PRFS COFRANCESCO, EDWARD R Name: COFRANCESCO, EDWARD R Name: 3829 WINDING LAKE CIRCLE 300 SOUTH ORANGE AVE #1100 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32812

Title: DP () Delete Title: DP (X) Change () Addition
Name: PANCHOOKIAN, RICHARD H
Address: 475 BOYNTON ROAD Address: 300 SOUTH ORANGE AVE SUITE 1100

City-St-Zip: MAITLAND, FL 32751 City-St-Zip: ORLANDO, FL 32812

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Title: DP () Delete Title: DP (X) Change () Addition Name: CUFF, SHERI A Name: CUFF, SHERI A

Address: 1486 GRACE LAKE CIRCLE Address: 300 S. ORANGE AVE SUITE 1100

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: ORLANDO, FL 32812

Title: DP () Delete Title: DP (X) Change () Addition Name: WINN, JEFFREY Name: WINN, JEFFREY

Address: 840 ROSEMERE CIRCLE Address: 300 SOUTH ORANGE AVE SUITE 1100

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32812

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: SHERI CUFF COO 07/01/2008