2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 02, 2008
Secretary of State

DOCUMENT# 828793

Entity Name: CIVES CORP.

Current Principal Place of Business:

1825 OLD ALABAMA RD
SUITE 200
ROSWELL, GA 30076 US

New Principal Place of Business:

Current Mailing Address:

1825 OLD ALABAMA ROAD
SUITE 200
ROSWELL, GA 30076 US

New Mailing Address:

FEI Number: 16-0955800 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	WOOLF, ROBERT H,	
Address:	1279 GREENBRIAR DRIVE	
City-St-Zip:	VASS, NC 28394 US	
Title:	CD	( ) Delete
Name:	LECHLER, HOWARD E,	
Address:	1621 MORNING MTN RD.	
City-St-Zip:	RALEIGH, NC 27614 US	
Title:	D	( ) Delete
Name:	SHAW, RONALD W,	
Address:	12065 BROOKFIELD CLUB DR	
City-St-Zip:	ROSWELL, GA 30075 US	
Title:	PD	( ) Delete
Name:	PHILLIPS, RAYMOND A	
Address:	8570 OLDE PACER POINTE	
City-St-Zip:	ROSWELL, GA 30076 US	
Title:	VSD	( ) Delete
Name:	DONOVAN, JOHN S	
Address:	5135 TRUMBULL COURT	
City-St-Zip:	DUNWOODY, GA 30338 US	
Title:	CD	( ) Delete
Name:	CONNOR, JOHN M	
Address:	102 FLYING SCOT COURT	
City-St-Zip:	ALPHARETTA, GA 30005	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	V	(X) Change ( ) Addition
Name:	THORNTON, WILLIAM A	
Address:	4165 SINCLAIR SHORES	
City-St-Zip:	CUMMING, GA 30131 US	
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: JOHN S. DONOVAN VSD 12/02/2008

Electronic Signature of Signing Officer or Director Date