2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005226

Entity Name: CAPHATS, INC.

FILED Jan 28, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6130 CLARK CENTER AVE., STE 107 SARASOTA, FL 34238				5053 OCEAN BLVD. SARASOTA, FL 34242			
Current Mailing Address:				New Mailing Address:			
505 PALMER AVENUE FALMOUTH, MA 02540				5053 OCEAN BLVD. SARASOTA, FL 34242			
FEI Number:	52-2237507	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Sta	atus Desired ()
Name and	Address of Cu	ırrent Registered Agent:		Name and	Address of N	ew Registered	l Agent:
5053 OCEA SARASOTA	A, FL 34242 named entity su	US ubmits this statement for the pur	rpose o	f changing it	s registered of	fice or registere	ed agent, or both,
SIGNATUR						_	
Election Can		c Signature of Registered Agen Trust Fund Contribution ().	t			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	MCKNIGHT, ROE	Delete BERT NTER AVE., STE 107		Title: Name: Address: City-St-Zip:	PCD (X) MCKNIGHT, RO 5053 OCEAN BI SARASOTA, FL	LVD.	on
Title: Name: Address: City-St-Zip:	MCKNIGHT, JER	Delete EMY NTER AVE., STE 107		Title: Name: Address: City-St-Zip:	SD (X) MCKNIGHT, JEF 17 HATCH RD. FALMOUTH, MA		on
Title: Name: Address: City-St-Zip:	MCKNIGHT, ÀND	Delete REA NTER AVE., STE 107		Title: Name: Address: City-St-Zip:	VTD (X) MCKNIGHT, ANI 97 GREATON R W. ROXBURY, I	D., APT. 1	on
Title: Name: Address: City-St-Zip:	MCKNIGHT JR, F	Delete ROBERT H ENTER AVE., STE. 107		Title: Name: Address: City-St-Zip:	MCKNIGHT JR,	VANIA AVE., APT.	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D () RINEY, MICHAE 256 BISHOPS F WALTHAM, MA	OREST DR.	on
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	D () MARTIN, MILLE 38 DURFEE DR E. FALMOUTH, I		on

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: ROBERT H MCKNIGHT PRES 01/28/2008