

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002909

Entity Name: CAERUS, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

151 SOUTH WYMORE ROAD, SUITE 3000
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

151 SOUTH WYMORE ROAD, SUITE 3000
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 30-0079826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, SHAWN M
151 SOUTH WYMORE ROAD, SUITE 3000
ALTAMONTE SPRINGS, FL 32714 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: P () Delete
Name: BIBEE, HAL
Address: 151 S WYMORE RD STE 3000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S () Delete
Name: STAATS, BOB
Address: 151 S WYMORE RD STE 3000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T () Delete
Name: SASNETT, DAVID
Address: 151 S WYMORE RD STE 3000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEWIS, SHAWN
Address: 151 S WYMORE RD STE 3000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

Title: C (X) Change () Addition
Name: CATALDO, TONY
Address: 151 S WYMORE RD STE 3000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: BOB STAATS

S

04/30/2007

Electronic Signature of Signing Officer or Director

Date