2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F43584

LAKELAND, FL 33810

City-St-Zip:

Entity Name: THE COMPLITER FORCE INC.

FILED Apr 22, 2008 Secretary of State

Littley Na	inc. The ook	MI OTERT ORGE, ING.			
Current Principal Place of Business:			New Principal Place of Business:		
	FFORD RD. TY, FL 33565				
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
	FFORD RD. TY, FL 33565				
FEI Number:	: 59-2122990	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
1701 SOÙ LAKELANI	JAMES C ESC TH FLORIDA A D, FL 33803	AVE US	purpose of changing its registers	d office or registered agent, or both,	
in the State	e of Florida.	submits this statement for the p	outpose of changing its registered	d office of registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () PROCTOR, RO 5816 STAFFOR PLANT CITY, F	RD RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V () FAULKNER, DE 2715 WIREGLA		Title: Name: Address:	() Change () Addition	

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: DEBRA FAULKNER V 04/22/2008