

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F80624

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: COMPUTER INFORMATION & PLANNING, INC.

## Current Principal Place of Business:

12443 SAN JOSE BLVD.  
SUITE 804  
JACKSONVILLE, FL 32223 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 600515  
JACKSONVILLE, FL 32260 US

## New Mailing Address:

FEI Number: 59-2192243      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTANNA, ERCIDES  
P.O. BOX 600515  
JACKSONVILLE, FL 32260 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: SANTANNA, ERCIDES  
Address: P.O. BOX 600515  
City-St-Zip: JACKSONVILLE, FL 32260

Title: V ( ) Delete  
Name: REYES, JR., EDISON  
Address: 3027 MARBON ESTATES LN S  
City-St-Zip: JACKSONVILLE, FL 32223

Title: V ( ) Delete  
Name: KOCERKA, WLADMIR  
Address: 7628 SAWTIMBER LANE  
City-St-Zip: JACKSONVILLE, FL 32256

## 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: KOCERKA, WLADMIR  
Address: 641 BOX BRANCH CIR  
City-St-Zip: JACKSONVILLE, FL 32259

I hereby certify that the information supplied with this filing does not qualify for the 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: E. SANTANNA

Electronic Signature of Signing Officer or Director

P

04/28/2006

\_\_\_\_\_ Date