2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G23470

FILED Jan 31, 2008 Secretary of State

Entity Name: JONATHAN ARTHUR CIEN	IER, INC.	•
Current Principal Place of Business:	New Principal Place of	f Business:
8700 COMMERCE STREET CAPE CANAVERAL, FL 32920		
Current Mailing Address:	New Mailing Address:	
8700 COMMERCE STREET CAPE CANAVERAL, FL 32920		
FEI Number: 59-2256366 FEI Number Applie	d For () FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered	d Agent: Name and Address of	New Registered Agent:
CIENER, JONATHAN A 8700 COMMERCE STREET CAPE CANAVERAL, FL 32920 US		
The above named entity submits this statem in the State of Florida.	ent for the purpose of changing its registered	office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Re	gistered Agent	Date
Election Campaign Financing Trust Fund Contribu	ition ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES	S TO OFFICERS AND DIRECTORS:
Title: PD () Delete Name: CIENER, JONATHAN A Address: 104 LA RIVIERE ROAD City-St-Zip: COCOA BEACH, FL	Name: CIENER, JON. Address: 8700 COMME	

CIENER, DAVID B

KERNERSVILLE, FL 27285

P.O. BOX 1069

Name:

Address:

City-St-Zip:

Title: () Delete Title: (X) Change () Addition CIENER, EMANUEL L CIENER, EMANUEL L Name: Name: Address: 104 LA RIVIERE ROAD Address: 104 LA RIVIERE ROAD COCOA BEACH, FL COCOA BEACH, FL 32931 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition Name: CIENER, GREGORY M Name: Address: P.O. BOX 1069 Address: KERNERSVILLE, FL 27285 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JONATHAN ARTHUR CIENER **PRES** 01/31/2008