## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H81865

Entity Name: C. C. U., INC.

**Current Principal Place of Business:** 

FILED Feb 12, 2009 Secretary of State

14089 SW 144 AVE RD. MIAMI, FL 33186 US	
Current Mailing Address:	New Mailing Address:
14089 SW 144 AVE RD. MIAMI, FL 33186 US	
FEI Number: 59-2629542 FEI Number Applied For ( ) FEI N	umber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
WALKER, BENJAMIN H JR 6550 SW 126 ST. MIAMI, FL 33156 US	WALKER, BENJAMIN H JR 6175 SW 133 STREET MIAMI, FL 33156 US
The above named entity submits this statement for the purpose in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE:	02/12/2009
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title:         DP         ( ) Delete           Name:         WALKER, BENJAMIN H.,, JR           Address:         6550 SW 126 ST           City-St-Zip:         MIAMI, FL 33156	Title: DP (X) Change ( ) Addition  Name: WALKER, BENJAMIN H.,, JR  Address: 6175 SW 133 STREET  City-St-Zip: MIAMI, FL 33156

Address: 7215 N.W. 63 WAY
City-St-Zip: PARKLAND, FL 33067

Title: S () Delete
Name: GRUDZIECKI, TERESA
Address: 9450 EASTER RD

CANGIANO, JOSE

() Delete

Title:

Name:

 City-St-Zip:
 MIAMI, FL 33157

 Title:
 T ( ) Delete

 Name:
 GLASS, CHRIS

Address: 4574 BRANDERMILL COURT City-St-Zip: EVANS, GA 30809

Title: VP () Delete Name: MCCUE, RAYMOND

Name: MCCUE, RAYMOND
Address: 12 RALEIGH DR
City-St-Zip: PALM COAST, FL 32164

City-St-Zip:

Title: T (X) Change ( ) Addition

CANGIANO, JOSE

4130 NE 30 AVENUE

LIGHTHOUSE POINT, FL 33064

(X) Change ( ) Addition

() Change () Addition

Name: WALKER, BENJAMIN H. JR Address: 6175 SW 133 STREET City-St-Zip: MIAMI, FL 33156

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**New Principal Place of Business:** 

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

Title:

Name:

Title:

Name:

Address:

Address:

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: BENJAMIN H. WALKER JR. DP 02/12/2009