

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H90640

FILED
Apr 14, 2009
Secretary of State

Entity Name: CELLINI ARTISTIC HARDWARE CORPORATION

Current Principal Place of Business:

1694 SE VILLAGE GREEN DRIVE
PORT SAINT LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

1694 SE VILLAGE GREEN DRIVE
PORT SAINT LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 59-2617386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.
417 E. VIRGINIA STREET
SUITE 1
TALLAHASSEE, FL 32301 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: PDS () Delete
Name: BLEW, CHRISTINE
Address: 8809 SOUTH INDIAN RIVER DRIVE
City-St-Zip: FT. PIERCE, FL

Title: DVT () Delete
Name: BLEW, JAMES W.
Address: 8809 SO. INDIAN RIVER DRIVE
City-St-Zip: FT. PIERCE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: BLEW, JAMES W.
Address: 8809 SOUTH INDIAN RIVER DRIVE
City-St-Zip: FT. PIERCE, FL 34982

Title: VDS (X) Change () Addition
Name: BLEW, CHRISTINE J.
Address: 8809 SOUTH INDIAN RIVER DRIVE
City-St-Zip: FT. PIERCE, FL 34982

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: JAMES W. BLEW

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date