

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L10304

FILED  
Apr 05, 2009  
Secretary of State

Entity Name: CONSOLIDATED VENTURES, INC.

**Current Principal Place of Business:**

100 RIVERSIDE DR  
#706  
COCOA, FL 32922

**New Principal Place of Business:**

**Current Mailing Address:**

100 RIVERSIDE DR  
#706  
COCOA, FL 32922

**New Mailing Address:**

FEI Number: 59-2964621      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VILARDEBO, ANGELINA N  
100 RIVERSIDE DR  
COCOA, FL 32922      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: D ( ) Delete  
Name: VILARDEBO, ANGELINA N.  
Address: 100 RIVERSIDE DR #706  
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete  
Name: VILARDEBO, CHARLES K  
Address: 100 RIVERSIDE DR #706  
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete  
Name: VILARDEBO, KENNETH M  
Address: 292 LANTERBACK ISLAND DR  
City-St-Zip: SATELLITE BEACH, FL 32937

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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: CHARLES K. VILARDEBO

MR.

04/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date