2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L70867

Address:

City-St-Zip:

15321 60TH STREET

ROYAL PALM BEACH, FL 33470

Entity Name: C/C AND ASSOCIATES INC

FILED Jan 05, 2009 Secretary of State

y		100000171	1201140.				
Current Principal Place of Business:				New Principal Place of Business:			
	RION AVE. 1, FL 32025	US					
Current Mailing Address:				New Mailing Address:			
	RION AVE. 7, FL 32025	US					
FEI Number:	: 59-3006221	FEI Numb	er Applied For()	FEI Number Not Appl	licable ()	Certificate of Status Desired	()
Name and	Address o	f Current Re	gistered Agent:	Name and	Address of	New Registered Agent:	
323 S. MAI	Z, IRVING H RION AVE. /, FL 32025						
	named enti e of Florida.	ty submits this	statement for the	purpose of changing i	ts registered	office or registered agent, or	r both,
SIGNATUR	RE:						
	Electi	ronic Signatur	e of Registered Ag	ent		Date	
Election Car	npaign Finand	ing Trust Fund	Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D CROWETZ, 323 S. MARI LAKE CITY,	ION AVE.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D CROWETZ, 2174 NW CO LAKE CITY,	OMBS TERR.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D CROWETZ, 1332 FL MA WEST PALN		406	Title: Name: Address: City-St-Zip:	CROWETZ, A		
Title: Name:	D CROWETZ,	() Delete ROBERT		Title: Name:	D (CROWETZ, R	X) 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.

Address:

City-St-Zip:

15321 60TH STREET

LOXAHATCHEE, FL 33470

SIGNATURE: IRVING H CROWETZ PRES 01/05/2009