

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L80156

Entity Name: ANTE CORP.

FILED  
Feb 24, 2009  
Secretary of State

## Current Principal Place of Business:

11008 WINDCHIME CIRCLE  
CLERMONT, FL 34711 US

## New Principal Place of Business:

## Current Mailing Address:

11008 WINDCHIME CIRCLE  
CLERMONT, FL 34711 US

## New Mailing Address:

FEI Number: 59-3014621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOUGLAS, LILLIAN  
11008 WINDCHIME CIRCLE  
CLERMONT, FL 34711 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: DSP ( ) Delete  
Name: DOUGLAS, LILLIAN  
Address: 11008 WINDCHIME CIRCLE  
City-St-Zip: CLERMONT, FL 34711 FL

Title: DVP ( ) Delete  
Name: DOUGLAS, STEVEN  
Address: 6420 MATCHETT RD  
City-St-Zip: ORLANDO, FL 32809 US

Title: TD ( ) Delete  
Name: DOUGLAS, LILLIAN  
Address: 11008 WINDCHIME CIRCLE  
City-St-Zip: CLERMONT, FL 34711 US

Title: D ( ) Delete  
Name: DANBOISE, CHERYL  
Address: 1928 WINDWILLOW RD  
City-St-Zip: ORLANDO, FL 32809 US

Title: D ( ) Delete  
Name: DANBOISE, THOMAS  
Address: 1928 WINDWILLOW RD  
City-St-Zip: ORLANDO, FL 32809 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

Title: D (X) Change ( ) Addition  
Name: DANBOISE, CHERYL  
Address: 17053 ARROWHEAD BOULEVARD  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D (X) Change ( ) Addition  
Name: DANBOISE, THOMAS  
Address: 17053 ARROWHEAD BOULEVARD  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: S ( ) Change (X) Addition  
Name: DOUGLAS, LILLIAN  
Address: 11008 WINDCHIME CIRCLE  
City-St-Zip: CLERMONT, FL 34711

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: LILLIAN DOUGLAS

S

02/24/2009

Electronic Signature of Signing Officer or Director

Date