2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L98690

Entity Name: CRAIG CATAMARAN CORPORATION

Current Principal Place of Business:	**New Principal Place of Business:**
4333 SILVER STAR ROAD UNIT 100 ORLANDO, FL 32808 US	

Current Mailing Address:	**New Mailing Address:**
4333 SILVER STAR ROAD UNIT 100 ORLANDO, FL 32808 US	

FEI Number: 59-3022387   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
CRAIG, ROBERT W. 4333 SILVER STAR ROAD UNIT 100 ORLANDO, FL 32808 US	CRAIG, EVANA M 4333 SILVER STAR ROAD UNIT 100 ORLANDO, FL 32808 US

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: EVANA M CRAIG   01/16/2009
_____
                 Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

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

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P ( ) Delete Name: CRAIG, ROBERT W., Address: 4333 SILVER STAR RD., UNIT 100 City-St-Zip: ORLANDO, FL 32808	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: VP ( ) Delete Name: CRAIG, EVANA Address: 4333 SILVER STAR RD., UNIT 100 City-St-Zip: ORLANDO, FL 32808	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: DP ( ) Delete Name: ERIK, CRAIG Address: 4333 SILVER STAR RD., UNIT 100 City-St-Zip: ORLANDO, FL 32808	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: EVANA M CRAIG   VP   01/16/2009
_____
           Electronic Signature of Signing Officer or Director   Date