2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2007
Secretary of State

DOCUMENT# M09895

Entity Name: C.C. CARLSON COMPANY

Current Principal Place of Business:

1865 BRICKELL AVE.
SUITE A-2011
MIAMI, FL 33129

New Principal Place of Business:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134

Current Mailing Address:

1865 BRICKELL AVE.
SUITE A-2011
MIAMI, FL 33129

New Mailing Address:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134

FEI Number: 59-2489589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARLSON, C. BRUCE
1865 BRICKELL AVE.
SUITE A-2011
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

STEWART AGENT SERVICES
2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134 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: LOUIS STINSON, JR. 01/30/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CARLSON, C. BRUCE, S, R.
Address: 1865 BRICKELL AVE #A2011
City-St-Zip: MIAMI, FL

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: STINSON, LOUIS JR
Address: 2199 PONCE DE LEON BOULEVARD, SUITE 301
City-St-Zip: CORAL GABLES, FL 33134 US

Title: P/S ( ) Change (X) Addition
Name: STINSON, LOUIS JR
Address: 2199 PONCE DE LEON BOULEVARD, SUITE 301
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUIS STINSON, JR. D 01/30/2007
Electronic Signature of Signing Officer or Director Date