

**2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 12, 2010  
Secretary of State**

DOCUMENT# M70180

Entity Name: COMMUNITY MANAGEMENT PROFESSIONALS, INC.

**Current Principal Place of Business:**

5401 S KIRKMAN ROAD  
SUITE 450  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

5401 N CENTRAL EXPY  
SUITE 300  
DALLAS, TX 75205 US

**New Mailing Address:**

FEI Number: 59-2990421      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CARONA, JOHN  
Address: 5401 N. CENTRAL EXPY, SUITE 300  
City-St-Zip: DALLAS, TX 75205

Title: P  
Name: DUPREY, RON  
Address: 5401 S KIRKMAN RD STE 450  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: EDEN, HELEN  
Address: 5401 N. CENTRAL EXPY, SUITE 300  
City-St-Zip: DALLAS, TX 75205

Title: S  
Name: REYES, PAUL  
Address: 5401 N. CENTRAL EXPY, SUITE 300  
City-St-Zip: DALLAS, TX 75205

Title: DM  
Name: CARPENTER, SUE  
Address: 5401 S KIRKMAN RD STE 450  
City-St-Zip: ORLANDO, FL 32819

I hereby 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 all other like empowered.

SIGNATURE: PAUL REYES

S

04/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date