2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2007 08:00 AM Secretary of State

Daytime Phone #

				_		C 4	af C4a
DOCUMENT # M89040 1. Entity Name CITBELT INVESTMENTS, INC				Secretary of Sta			
Principal Place	e of Rusiness	Mailing Address	ı	1			
8750 LK HAN		P O BOX 770429	US				
				11000000			
- N. C. 92			· · · · · · · · · · · · · · · · · · ·	01062007	No Chg-P	CR2E034 (11/	05)
A Para C	O NOT WRITE	IN THIS SPA	CF				
			16. 16.	4. FEI Numb 59-291		<u> </u>	Applied For Not Applicable
						_ \$9.75	Additional
]				5. Certificate	of Status Desired	Fee Req	
	6. Name and Address of Current F	tegistered Agent					
FIELDS, RANDOLPH H							
	H ORANGE AVENUE		DO	NOT W	/RITE		
20TH FLOO	OR		INI "	гше ег	2465		
ORLANDO), FL 32801		; IIN	THIS SI	ACE		
			8.5				
8. The above	named entity submits this statement for	the purpose of changing its registe	red office or registe	red agent, or bo	th, in the State of F	lorida. I am familiar v	with, and accept
	ons of registered agent.				,		,
CIONATURE							
SIGNATURE_	Signature, typed or printed name of registered agent ar	red Agent signature required	d when reinstating)	•	DATE		
	E NOW!!! FEE IS \$150.00 by 1, 2007 Fee will be \$550.0	9. Election Campaign Fina Trust Fund Contribution		.00 May Be led to Fees	U000 01/10/0	00581640 7-80095-023	150.00
10.	OFFICERS AND D	DIRECTORS		25.			
TITLE	PD			**		•	
NAME	RICQUETTE, RICHARD						
STREET ADDRESS	6101 PIER PL DR		•				
CITY-ST-ZIP	LAKELAND, FL 33814						
TITLE	VD			•			
NAME STREET ADDRESS	FICQUETTE, THOMAS 100 GROSVENOR DR				**************************************		
CITY-ST-ZIP	RALEIGH, NC 27615		19 100	era		•	
TUTLE	STD	<u> </u>	T N			٠,	75
NAME	FICQUETTE, JOHN D		I.				•
STREET ADDRESS	8750 IKE HANCOCK ROAD		1	DC	NOT 14	DITE	
CITY-ST-ZIP	WINTER GARDEN, FL 34787		J	DO	NOT W	KIIE	
TITLE				· IN	THIS SI	PACE	
NAME]	·		~~ ~	
STREET ADDRESS							
CITY-ST-ZIP						**	
TITLE NAME			1				
STREET ADDRESS			\$				
CITY-ST-ZIP			*				
TITLE							• •
NAME			W -V		. ^		-5,
STREET ADDRESS			ľ				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: