

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008366

FILED
Apr 06, 2011
Secretary of State

Entity Name: CARIBBEAN PARTNERSHIP, INC.

Current Principal Place of Business:

9075 SEMINOLE BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

9075 SEMINOLE BLVD
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 27-0973803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULER, TIMOTHY C ESQ
9075 SEMINOLE BLVD
SEMINOLE, FL 33772 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: ADAMSON, ERIC
Address: 19 WALNUT DR
City-St-Zip: FRONT ROYAL, VA 22630

Title: D
Name: SMARGE, JOHN
Address: 3861 DOMESTIC AVE
City-St-Zip: NAPLES, FL 34104

Title: D
Name: JONES, MILTON
Address: PO BOX 1690
City-St-Zip: ZEPHYRHILLS, FL 33539

Title: C
Name: RASSIN, BARRY
Address: PO BOX N-972
City-St-Zip: NASSAU BAHAMAS, XX

Title: CE
Name: VLASS, J.V
Address: 14370 FREEMANVILLE RD
City-St-Zip: ALPHARETTA, GA 30004

Title: S
Name: ISRAEL, GARY
Address: 21684 WINDHAM RUN
City-St-Zip: ESTERO, FL 339283256

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PHILIP H. LUSTIG III

TREA

04/06/2011

Electronic Signature of Signing Officer or Director

Date