## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000025875

Entity Name: COMMUNITYIO CORP.

**FILED** Apr 08, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

17011 SW 64TH CT 2800 GLADES CIRCLE

FORT LAUDERDALE, FL 33331 SUITE 119

WESTON, FL 33327

**Current Mailing Address: New Mailing Address:** 

14251 NORTHWEST 4TH STREET 2800 GLADES CIRCLE SUNRISE, FL 33325 SUITE 119

WESTON, FL 33327

FEI Number: 65-0990541 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:

SMITH, JEFFREY SCOTT SMITH, JEFFREY S 17011 SW 64TH CT 2800 GLADES CIRCLE FORT LAUDERDALE, FL 33331 US

SUITE 119 WESTON, FL 33327 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: JEFFREY SCOTT SMITH 04/08/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

SMITH, JEFFREY S SMITH, JEFFREY S Name: Name: 14251 NORTHWEST 4TH STREET 2800 GLADES CIRCLE SUITE 119 Address: Address:

City-St-Zip: SUNRISE, FL 33325 City-St-Zip: WESTON, FL 33327

Title: VD Title: VD (X) Change ( ) Addition ( ) Delete

Name: SMITH, RUTH A Name: SMITH, RUTH A

14251 NORTHWEST 4TH STREET 2800 GLADES CIRCLE SUITE 119 Address: Address:

SUNRISE, FL 33325 WESTON, FL 33327 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: STD ( ) Delete SD

SMITH, RUTH A Name: SMITH, JEFFREY S Name:

14251 NORTHWEST 4TH STREET 2800 GLADES CIRCLE SUITE 119 Address: Address:

City-St-Zip: SUNRISE, FL 33325 City-St-Zip: WESTON, FL 33327

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: JEFFREY SCOTT SMITH PD 04/08/2009