2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069888

Entity Name: EXECU-SUITES OFFICE BUSINESS CENTERS, INC.

FILED Feb 19, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
	NGE AVE, ST), FL 32801	E 500	5401 S. KIRKMAN RD. SUITE 310 ORLANDO, FL 32819		
Current M	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
37 N ORANGE AVE, STE 500 ORLANDO, FL 32801			5401 S. KIRKMAN RD. SUITE 310 ORLANDO, FL 32819		
FEI Number:	: 59-3664138	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
37 N ORAI ORLANDO The above	ATHERINE NGE AVE, ST D, FL 32801 named entity of Florida.	US	ne purpose of changing its registered o	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered	Agent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRICE, DOUG	AVE, STE 500	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	PRICE, CATH	AVE, STE 500	Title: (Name: Address: City-St-Zip:) Change ()Addition	

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: CATHERINE PRICE PRES 02/19/2009