2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115385

Entity Name: COMPOSITES UNLIMITED, INC.

FILED Jan 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 300 INDUSTRIAL CIRCLE SEBASTIAN, FL 32958 **Current Mailing Address: New Mailing Address:** P.O. BOX 22 GRANT, FL 32949 FEI Number: 59-3686356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, J. PATRICK 930 S HARBOR CITY BLVD SUITE 505 MELBOURNE, FL 32901 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition LEE, DAVID LEE, DAVID Name: Name: 1265 GRANT ROAD 631 INDIAN OAKS DRIVE Address: Address: City-St-Zip: GRANT, FL 32949 City-St-Zip: MELBOURNE, FL 32901 Title: DVTS Title: **DVTS** () Delete (X) Change () Addition Name: LEE. MARY DAPHNE Name: LEE. MARY DAPHNE 1265 GRANT ROAD 631 INDIAN OAKS DRIVE Address: Address: GRANT, FL 32949 City-St-Zip: City-St-Zip: MELBOURNE, FL 32901 Title: () Delete Title: () Change () Addition LEE, RICHARD D Name: Name: 1663 DOZIER CIRCLE SE Address: Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: Title: () Delete Title: () Change () Addition LEE, JASON M Name: Name: Address: 4672 CREW CIRCLE #2 Address: City-St-Zip: MELBOURNE, FL 32904 City-St-Zip:

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: DAVID LEE PRES 01/05/2008