## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027779

Entity Name: CALDWELL MEDIA GROUP, INC.

FILED Jun 24, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

14197 86RD N. 1300 CHINABERRY DRIVE LOXAHATCHEE, FL 33470 WESTON, FL 33327

Current Mailing Address: New Mailing Address:

14197 86RD N. 1300 CHINABERRY DRIVE LOXAHATCHEE, FL 33470 WESTON, FL 33327

FEI Number: 65-1086450 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:

CALDWELL, ROSEMARY

14197 86RD N

LOXAHATCHEE, FL 33470 US

ESPINOZA-CALDWELL, ROSEMARY

1300 CHINABERRY BLVD

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: JOHN CALDWELL 06/24/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition Name: CALDWELL, JOHN P Name: ESPINOZA-CALDWELL, ROSEMARY

 Address:
 14197 86RD N
 Address:
 1300 CHINABERRY DRIVE

 City-St-Zip:
 LOXAHATCHEE, FL 33470
 City-St-Zip:
 WESTON, FL 33327

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition
Name: CAL DWELL ROSEMARY Name: CAL DWELL JOHN P

 Name:
 CALDWELL, ROSEMARY
 Name:
 CALDWELL, JOHN P

 Address:
 14197 86RD N
 Address:
 1300 CHINABERRY DRIVE

 City-St-Zip:
 LOXAHATCHEE, FL 33470
 City-St-Zip:
 WESTON, FL 33327

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

 Name:
 CALDWELL, SHIRLEY
 Name:

 Address:
 550 CRANES WAY #224
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 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: ROSEMARY ESPINOZA-CALDWELL PR 06/24/2009