

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038144

FILED  
Mar 27, 2007  
Secretary of State

Entity Name: CENTRAL MODULAR SYSTEMS, INC.

## Current Principal Place of Business:

201 S. AMELIA AVE., G-4  
DELAND, FL 32724

## New Principal Place of Business:

## Current Mailing Address:

201 S. AMELIA AVE., G-4  
DELAND, FL 32724

## New Mailing Address:

FEI Number: 59-3713336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUIRLINGER, ROBERT A  
201 S. AMELIA AVE., G-4  
DELAND, FL 32724 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GUIRLINGER, ROBERT A  
Address: 2218 RIVER RIDGE ROAD  
City-St-Zip: DELAND, FL 32720

Title: D ( ) Delete  
Name: GUIRLINGER, EDWARD G  
Address: 1331 OAK HILL DRIVE  
City-St-Zip: BLACKLICK, OH 43004

Title: D ( ) Delete  
Name: PAETTIE, LINDA L  
Address: 860 N. KANSAS AVE.  
City-St-Zip: DELAND, FL 32724

Title: D ( ) Delete  
Name: LITZELFELNER, GLENDA V  
Address: 1405 HAFT DR UNIT A-10  
City-St-Zip: REYNOLDSBURG, OH 43068

Title: D ( ) Delete  
Name: GUIRLINGER, ZOE F  
Address: 104 SIGNAL HILL ROAD  
City-St-Zip: HOLLAND, PA 18966

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT A. GUIRLINGER

D

03/27/2007

Electronic Signature of Signing Officer or Director

Date