## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000038144

Entity Name: CENTRAL MODULAR SYSTEMS, INC

FILED Feb 20, 2008 Secretary of State

The second of th						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
201 S. AME DELAND, F	ELIA AVE., G-4 L 32724					
Current Mailing Address:			New Mailing Address:			
201 S. AME DELAND, F	ELIA AVE., G-4 EL 32724					
FEI Number: 59-3713336 FEI Number Applied For ( ) F		FEI Number Not Appli	El Number Not Applicable ( ) Certificate of Status Desired (X)			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					New Registered Agent:	
	ER, ROBERT A ELIA AVE., G-4 EL 32724 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:						
Electronic Signature of Registered Agent					Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () [ GUIRLINGER, RO 2218 RIVER RID DELAND, FL 32	GE ROAD	Title: Name: Address: City-St-Zip:	D (X GUIRLINGER, 2070 STRATFO DELAND, FL 3	ORD DRIVE	
Title: Name: Address: City-St-Zip:	D () [ GUIRLINGER, EI 1331 OAK HILL [ BLACKLICK, OH	DRIVE	Title: Name: Address: City-St-Zip:	D (X GUIRLINGER, 5868 KITZMILI NEW ALBANY,	LER ROAD	
Title: Name: Address: City-St-Zip:	D ()[ PAETTIE, LINDA 860 N. KANSAS DELAND, FL 32	AVE.	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () [ LITZELFELNER, 1405 HAFT DR U REYNOLDSBUR	JNIT A-10	Title: Name: Address: City-St-Zip:	LITZELFELNE 7690 GODFRE		
Title: Name: Address: City-St-Zip:	D () I GUIRLINGER, ZO 104 SIGNAL HILI HOLLAND, PA 1	L ROAD	Title: Name: Address: City-St-Zip:	D (X GUIRLINGER, 4976 CONIFER WESTERVILLE	R DRIVE	

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: ROBERT A. GUIRLINGER D 02/20/2008