

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000057980

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Entity Name:** COMMUNITY ACCOUNTING & MANAGEMENT SERVICES PLUS, INC.

**Current Principal Place of Business:**

4524 GUN CLUB RD  
SUITE 105  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

4524 GUN CLUB RD  
SUITE 105  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

**FEI Number:** 65-1121646

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAUNDERS, KIM  
4524 GUN CLUB RD  
SUITE 105  
WEST PALM BEACH, FL 33415 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SAUNDERS, KIM C  
Address: 4524 GUN CLUB ROAD SUITE 105  
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby 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 all other like empowered.

SIGNATURE: KIM SAUNDERS

P

03/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date