

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000089260

Entity Name: CTG HOLDINGS, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

2965 SW 22ND AVE
207
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

660 LINTON BLVD STE 206G
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 30-0061558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LHOTA, DAVID P ESQ
C/O STREARNS, WEAVER, MILLER, WEISSLER
200 EAST BROWARD BLVD STE 1900
FT LAUDERDALE, FL 33301 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: PETRUZZI, CHARLES
Address: 2965 SW 22 AVE 207
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: PENBE, GREG
Address: 2965 SW 22 AVE 207
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: PETRUZZI, ANTHONY
Address: 2965 SW 22 AVE 207
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: PENBE, CLIFF
Address: 2965 SW 22 AVE 207
City-St-Zip: DELRAY BEACH, FL 33445

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:

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: CLIFF PENBE

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date