2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 14, 2009
Secretary of State

DOCUMENT# P01000108436

Entity Name: CRYSTAL CLEAR CAPITAL CONSULTANTS, INC.

Current Principal Place of Business:

107 LEVY ROAD
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 330674
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number: 59-3754613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MONSON-ANDERSON, LAURIE
107 LEVY ROAD
ATLANTIC BEACH, FL 32233 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: CEOS ( ) Delete
Name: MONSON-ANDERSON, LAURIE
Address: POST OFFICE BOX 330674
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: PT ( ) Delete
Name: LILLY, JEMAL A
Address: 5225 CANYON CREST DR., #71-415
City-St-Zip: RIVERSIDE, CA 92507

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PT (X) Change ( ) Addition
Name: MONSON-ANDERSON, LAURIE
Address: PO BOX 330674
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: COO ( ) Change (X) Addition
Name: MONSON-ANDERSON, LAURIE
Address: PO BOX 330674
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: CD ( ) Change (X) Addition
Name: MONSON-ANDERSON, LAURIE
Address: PO BOX 330674
City-St-Zip: ATLANTIC BEACH, FL 32233

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: LAURIE MONSON-ANDERSON CEO 09/14/2009

Electronic Signature of Signing Officer or Director Date