2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000109583

Name:

Address:

City-St-Zip:

KRICHBAUM, RICHARD E

FORT MYERS, FL 33919

6216 WHISKEY CREEK DR, STE A

Entity Name: CJ MANAGEMENT SERVICES, INC

FILED Jan 22, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
C/O STEVEN R WHITLEY 2075 W FIRST ST STE 300 FORT MYERS, FL 33901			5249 SUMMERLIN C	C/O STEVEN R WHITLEY 5249 SUMMERLIN COMMONS BLVD. FORT MYERS, FL 33907	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P O BOX	/EN R WHITLE 1020 ERS, FL 3390				
FEI Number	: 65-1159478	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
5551 RIDO NAPLES, I	GEWOOD DR, FL 34108 US named entity e e of Florida.		purpose of changing its registere	ed office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	LOWELL, CAR	T CLUB RD, UNIT 22B	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () WHITLEY, STE 2075 W FIRST FORT MYERS,	ST STE 300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VTS () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN R. WHITLEY P 01/22/2009