2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007
Secretary of State

DOCUMENT# P02000001881

Entity Name: CELIENE BRUCE CONSULTING, INC.

Current Principal Place of Business:

5480 SW 37TH STREET
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

5500 S.W. 136TH AVENUE
SWRANCHES, FL 33330

New Mailing Address:

5480 SW 37TH STREET
OCALA, FL 34474

FEI Number: 01-0714370 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WACHS, JEFFREY S ESQ.
1177 S.E. 3RD AVENUE
FORT LAUDERDALE, FL 33062 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: PSTD ( ) Delete
Name: BRUCE, CELIENE
Address: 5500 S.W. 136TH AVENUE
City-St-Zip: SW RANCHES, FL 33330

Title: V ( ) Delete
Name: BRUCE, CHARLES
Address: 5500 S.W. 136TH AVENUE
City-St-Zip: SW RANCHES, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: BRUCE, CELIENE
Address: 5480 SW 37TH STREET
City-St-Zip: OCALA, FL 34474

Title: V (X) Change ( ) Addition
Name: BRUCE, CHARLES
Address: 5480 SW 37TH STREET
City-St-Zip: OCALA, FL 34474

I hereby certify that the information supplied with this filing does not qualify for the 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: CELIENE BRUCE PSTD 02/05/2007
Electronic Signature of Signing Officer or Director Date