2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014981

Entity Name: CLL SOLUTIONS, INC.

City-St-Zip: MINNEOLA, FL 34715

FILED Sep 06, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
619 WHISPER SOUND ST. MINNEOLA, FL 34715	
Current Mailing Address:	New Mailing Address:
619 WHISPER SOUND ST. MINNEOLA, FL 34715	
FEI Number: 57-1149602 FEI Number Applied Fe	or () FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered A	gent: Name and Address of New Registered Agent:
LOWE, CHAD L 619 WHISPER SOUND ST. MINNEOLA, FL 34715 US	
The above named entity submits this statement in the State of Florida.	for the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Regist	ered Agent Date
Election Campaign Financing Trust Fund Contribution	1().
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PRES () Delete Name: LOWE, CHAD L Address: 619 WHISPER SOLIND ST	Title: () Change () Addition Name: Address:

City-St-Zip:

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: CHAD L. LOWE PRES 09/06/2006