2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023959

BROXTON, JENNIFER

BROOKSVILLE, FL 34610

15614 U.S. HWY 41

Name:

Address:

City-St-Zip:

FILED Mar 23, 2009 Secretary of State

Entity Name: CENTRAL FLORIDA GEO TECH, INC.								
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
15614 U.S. BROOKSV		4610						
Current Mailing Address:			New Mailing Address:					
15614 U.S. HWY 41 BROOKSVILLE, FL 34610			7107 SEABURY CT TAMPA, FL 33615					
FEI Number:	03-0507908	FEI Number A	Applied For ()	FEI Number Not Appli	cable ()	Certificate of Sta	atus Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
BROXTON 15614 U.S. BROOKSV	HWY 41							
The above in the State		ty submits this st	atement for the pu	rpose of changing it	s registered	d office or registere	ed agent, or both,	
SIGNATUR	RE:							
	Elect	ronic Signature c	of Registered Agen	t		Date		
Election Carr	paign Finan	cing Trust Fund Co	ntribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P,D BROXTON, 15614 U.S. BROOKSVII			Title: Name: Address: City-St-Zip:		() Change () Addition	no	
Title: Name: Address: City-St-Zip:	VP,D REGISTER, 16716 SWE DADE CITY	ETWATER RD		Title: Name: Address: City-St-Zip:		() Change () Addition	on	
Title: Name: Address: City-St-Zip:	S BROXTON, 15614 U.S. BROOKSVII			Title: Name: Address: City-St-Zip:	S BROXTON, 3 7107 SEABU TAMPA, FL	JRY CT	on	
Title:	Т	() Delete		Title:	Т	(X) Change () Additi	on	

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

BROXTON, JENNIFER

7107 SEABURY CT

TAMPA, FL 33615

SIGNATURE: JENNIFER BROXTON S 03/23/2009