2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000062884

Entity Name: CSI OF FLORIDA, INC.

BLANTON, MACK

HOLLYWOOD, FL 33021

3325 HOLLYWOOD BLVD SUITE #503

Name:

Address: City-St-Zip: FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3325 HOLLYWOOD BLVD., SUITE 503 HOLLYWOOD, FL 33021 **Current Mailing Address: New Mailing Address:** P.O. BOX 813847 HOLLYWOOD, FL 33081 FEI Number: 06-1698403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOFFREDO, THOMAS H % GARY ROBINSON, P.A. 401 EAST LAS OLAS BLVD., SUITE 1850 FORT LAUDERDALE, FL 33301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition WILDS, RANDALL Name: Name: 3325 HOLLYWOOD BLVD SUITE #503 Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: Title: Title: () Delete () Change () Addition Name: STEWART, ORALD Name: 3325 HOLLYWOOD BLVD SUITE #503 Address: Address: HOLLYWOOD, FL 33021 City-St-Zip: City-St-Zip: () Delete Title: Title: STD () 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: MACK BLANTON STD 04/15/2008