2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000000904

Entity Name: LAFORGE-MILES CORPORATION

FILED Apr 09, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4915 RATTLESNAKE HAMMOCK RD NAPLES, FL 34113

Current Mailing Address: New Mailing Address:

1833 WINDING OAKS WAY NAPLES, FL 34109

FEI Number: 71-0958204 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:

LAFORGE, CYNTHIA

1833 WINDING OAKS WAY
NAPLES, FL 34109 US

MILES, CYNTHIA

1833 WINDING OAKS WAY
NAPLES, FL 34109 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: CYNTHIA MILES 04/09/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 LAFORGE, CYNTHIA
 Name:
 MILES, CYNTHIA

 Address:
 1833 WINDING OAKS WAY
 Address:
 1833 WINDING OAKS WAY

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

Title: VP () Delete Title: () Change () Addition
Name: MILES DARREN K Name:

 Name:
 MILES, DARREN K
 Name:

 Address:
 1833 WINDING OAKS WAY
 Address:

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:

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.

SIGNATURE: CYNTHIA MILES P 04/09/2009