

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036169

Entity Name: GREG CIPES, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

9541 NW 42ND CT
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

9541 NW 42ND CT
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 20-0782694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIPES, GEOFFREY
9541 NW 42ND CT
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

CIPES, GEOFFREY VP
9541 NW 42ND CT
CORAL SPRINGS, FL 33065 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: GEOFFREY CIPES

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,S () Delete
Name: CIPES, GREGORY
Address: 8409 LOOKOUT MOUNTAIN AVENUE
City-St-Zip: LOS ANGELES, CA 90046

Title: VP () Delete
Name: CIPES, GEOFFREY
Address: 9541 NW 42ND CT
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: CIPES, GREGORY PRES
Address: 8409 LOOKOUT MOUNTAIN AVENUE
City-St-Zip: LOS ANGELES, CA 90046

Title: VP (X) Change () Addition
Name: CIPES, GEOFFREY VP
Address: 9541 NW 42ND CT
City-St-Zip: CORAL SPRINGS, FL 33065

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: GEOFFREY CIPES

MR

04/15/2009

Electronic Signature of Signing Officer or Director

Date