

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037069

FILED
Apr 17, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA SAFETY PRODUCTS INC.

Current Principal Place of Business:

3319 CALCUTTA AVE
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

3319 CALCUTTA AVE
ORLANDO, FL 32817 US

New Mailing Address:

FEI Number: 03-0538127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOEDERN, RICHARD
3319 CALCUTTA AVE.
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

SCHROEDER, RICHARD
3319 CALCUTTA AVE.
ORLANDO, FL 32817 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: RICHARD SCHROEDER

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHOEDER, RICHARD
Address: 3319 CALCUTTA AVENUE
City-St-Zip: ORLANDO, FL 32817 US

Title: VD () Delete
Name: NEWSHUTZ, EVA
Address: 4456 VIRGINIA DRIVE
City-St-Zip: ORLANDO, FL 32814 US

Title: STD () Delete
Name: RICHARDSON, RENEE
Address: 3319 CALCUTTA AVENUE
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHROEDER, RICHARD
Address: 3319 CALCUTTA AVENUE
City-St-Zip: ORLANDO, FL 32817 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: SCHROEDER, RENEE
Address: 3319 CALCUTTA AVENUE
City-St-Zip: ORLANDO, FL 32817

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: EVA NEWSHUTZ

VD

04/17/2009

Electronic Signature of Signing Officer or Director

Date