

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000048177

Entity Name: CIVI, INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4557 COLLEEN ST.  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

4557 COLLEEN ST.  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

FEI Number: 20-0902789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CIVITELLA, THOMAS DR.  
4557 COLLEEN ST  
PORT CHARLOTTE, FL 33952 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: ST  
Name: CIVITELLA, THOMAS R DR.  
Address: 4557 COLLEEN ST  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: PV  
Name: CIVITELLA, TIMOTHY R  
Address: 17254 SPEARMINT LN  
City-St-Zip: PUNTA GORDA, FL 33955

I hereby 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 all other like empowered.

SIGNATURE: TOM CIVITELLA

P

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date