

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000052593

FILED
May 13, 2009
Secretary of State**Entity Name:** CENTRAL FLORIDA REO NETWORK, INC.**Current Principal Place of Business:**4640 LIPSCOMB ST NE
SUITE 8
PALM BAY, FL 32905 US**New Principal Place of Business:****Current Mailing Address:**599 FIJI CT NW
PALM BAY, FL 32907 US**New Mailing Address:****FEI Number:** 26-3184347**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GREENE, DESMOND J
599 FIJI CT NW
PALM BAY, FL 32907 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:** DPST () Delete
Name: GREENE, DESMOND J
Address: 599 FIJI CT NW
City-St-Zip: PALM BAY, FL 32907**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DPST (X) Change () Addition
Name: LANGE, STEPHANIE J
Address: 599 DELEON CT
City-St-Zip: PALM BAY, FL 32905

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: STEPHANIE LANGE

DPST

05/13/2009

Electronic Signature of Signing Officer or Director_____
Date