

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125378

FILED
Apr 03, 2009
Secretary of State

Entity Name: CITRUS COAST CONCIERGE INC.

Current Principal Place of Business:

1100 MICHIGAN AVE
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 770102
NAPLES, FL 341070102

New Mailing Address:

FEI Number: 61-1475829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES, STOCKMAN L RA
8130 WILSHIRE LAKES BLVD
NAPLES, FL 34109 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CAMPBELL, ELIZABETH A PRES
Address: 1100 MICHIGAN AVENUE
City-St-Zip: NAPLES, FL 34103

Title: MR. () Delete
Name: JAMES, STOCKMAN
Address: 8130 WILSHIRE LAKES BLVD
City-St-Zip: NAPLES, FL 34110

Title: MS. (X) Delete
Name: KAY, NICHOLS
Address: 1100 MICHIGAN AVE
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: JAMES L STOCKMAN

RA

04/03/2009

Electronic Signature of Signing Officer or Director

Date