

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139154

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: CPROMPT COMPUTER SERVICES, INC.

## Current Principal Place of Business:

2757 MAURITANIA ROAD  
PUNTA GORDA, FL 33983

## New Principal Place of Business:

12570 TAMiami TRAIL  
UNIT C  
PUNTA GORDA, FL 33955

## Current Mailing Address:

2757 MAURITANIA ROAD  
PUNTA GORDA, FL 33983

## New Mailing Address:

12570 TAMiami TRAIL  
UNIT C  
PUNTA GORDA, FL 33955

FEI Number: 20-1728259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAILEY, THOMAS B  
2757 MAURITANIA ROAD  
PUNTA GORDA, FL 33983 US

## Name and Address of New Registered Agent:

MAILEY, THOMAS B  
12570 TAMiami TRAIL  
UNIT C  
PUNTA GORDA, FL 33955 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:

01/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAILEY, THOMAS B  
Address: 2757 MAURITANIA ROAD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: D ( ) Delete  
Name: MAILEY, PAULINE  
Address: 2757 MAURITANIA ROAD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: D ( ) Delete  
Name: DE BRUYN, JOSIAS REYNIER  
Address: 408 ORINOCO STREET  
City-St-Zip: PUNTA GORDA, FL 33983

Title: D ( ) Delete  
Name: DE BRUYN, HELEN LOUISE  
Address: 408 ORINOCO STREET  
City-St-Zip: PUNTA GORDA, FL 33983

## 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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS MAILEY

PRES

01/30/2007

Electronic Signature of Signing Officer or Director

Date