

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159387

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: COOTER RIDGE VENTURES, INC.

## Current Principal Place of Business:

1515 N. RIVER HILLS DR.  
TEMPLE TERRACE, FL 33617

## New Principal Place of Business:

## Current Mailing Address:

1515 N. RIVER HILLS DR.  
TEMPLE TERRACE, FL 33617

## New Mailing Address:

201 NORTH FRANKLIN STREET  
SUITE 2000  
TAMPA, FL 33602

FEI Number: 20-1932884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOODWIN, JAMES W ESQ.  
201 N. FRANKLIN ST., STE. 2000  
TAMPA, FL 33602 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: PSD ( ) Delete  
Name: PORTER, J. DON  
Address: 1515 N. RIVER HILLS DR.  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VPTD ( ) Delete  
Name: PORTER, WILLIAM H.  
Address: 34815 PROSPECT RD  
City-St-Zip: DADE CITY, FL 33525

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PORTER, J. DON  
Address: 1515 N. RIVER HILLS DR.  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: STD (X) Change ( ) Addition  
Name: PORTER, WILLIAM H.  
Address: 34815 PROSPECT RD  
City-St-Zip: DADE CITY, FL 33525

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: J. DON PORTER

P

04/17/2009

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

\_\_\_\_\_  
Date