2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000000907

Entity Name: CAPITAL SOURCES GROUP, INC.

FILED Jun 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13133 PROFESSIONAL 1126 SHIPWATCH DR JACKSONVILLE, FL 32225 SUITE 200

JACKSONVILLE, FL 32225

New Mailing Address: Current Mailing Address:

13133 PROFESSIONAL 1126 SHIPWATCH DR SUITE 200 JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

FEI Number: 20-2094155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VOSE, GRETCHEN R VOSE LAW FIRM VOSE, GRETCHEN R VOSE LAW FIRM 327 WEKIVA COMMONS CIR 324 W. MORSE BLVD APOPKA, FL 32712 US WINTER PARK, FL 32789 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: GRETCHEN VOSE 06/16/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition CHVALA, WILLIAM J CHVALA, WILLIAM J Name: Name: 1126 SHIPWATCH DR 1126 SHIPWATCH DR Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

Title: VΡ (X) Delete Title: () Change () Addition

Name: CHVALA, JOSEPH W Name: 1126 SHIPWATCH DR Address: Address: JACKSONVILLE, FL 32225 City-St-Zip: 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: WILLIAM J. CHVALA **PRES** 06/16/2009