2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105610

Entity Name: CEII PALAFOX, INC.

FILED Apr 24, 2009 Secretary of State

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

302 N. BARCELONA STREET PENSACOLA, FL 32502 US

Current Mailing Address: New Mailing Address:

302 N. BARCELONA STREET PENSACOLA, FL 32502 US

FEI Number: 20-3214810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HORVATH, DANIEL R

302 N. BARCELONA STREET
PENSCOLA, FL 32502 US

MOORE, HILL & WESTMORELAND, PA
302 N. BARCELONA STREET
PENSCOLA, FL 32502 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: MARGARET STOPP 04/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P () Delete Title: D/P (X) Change () Addition

Name:HORVATH, DANIEL RName:TOWNSEND, RONALDAddress:302 N. BARCELONA STREETAddress:1400 NORTH G STREETCity-St-Zip:PENSACOLA, FL 32502 USCity-St-Zip:PENSACOLA, FL 32501

Title: DV () Delete Title: () Change () Addition

 Name:
 DUFFEY, SHERRY
 Name:

 Address:
 302 N. BARCELONA STREET
 Address:

 City-St-Zip:
 PENSACOLA, FL 32501 US
 City-St-Zip:

Title: D/S () Delete Title: () Change () Addition

 Name:
 SMITH, LESTER
 Name:

 Address:
 302 N. BARCELONA STREET
 Address:

 City-St-Zip:
 PENSACOLA, FL 32502 US
 City-St-Zip:

Title: D/T () Delete Title: D/T (X) Change () Addition

Name: BOYD, WILLIAM Name: BYRD, WILLIAM

Address: 302 N. BARCELONA STREET Address: 302 N. BARCELONA STREET
City-St-Zip: PENSACOLA, FL 32501 US City-St-Zip: PENSACOLA, FL 32501 US

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: RONALD TOWNSEND D/P 04/24/2009