

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163242

FILED
Aug 26, 2008
Secretary of State

Entity Name: CHARLOTTE COUNTY PROPERTIES INC.

Current Principal Place of Business:

611 SHARON CIRCLE
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

611 SHARON CIRCLE
PORT CHARLOTTE, FL 33952

New Mailing Address:

P.O. BOX 495487
PORT CHARLOTTE, FL 33949

FEI Number: 22-3918936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ALBANES, LEANDRO R PRES
611 SHARON CIRCLE
PORT CHARLOTTE, FL 33952 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: LEANDRO R. ALBANES

08/26/2008

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:

Title: PSTD () Delete
Name: ALBANES, LEANDRO R
Address: 611 SHARON CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LEANDRO R. ALBANES

PRES

08/26/2008

Electronic Signature of Signing Officer or Director

Date