

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005215

FILED  
Apr 25, 2011  
Secretary of State

Entity Name: C&M CABLE CONCEPTS II, INC

**Current Principal Place of Business:**

7451 SADLER RD BOX 739  
TANGERINE, FL 32777

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 739  
TANGERINE, FL 32777

**New Mailing Address:**

FEI Number: 20-4125529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAPP, BJ  
7451 SADLER RD BOX 67  
TANGERINE, FL 32777 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CLARK, MISTY D  
Address: 121 CARLISLE AVE NW  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: P  
Name: ALLEN, CHERYL A  
Address: 121 CARLISLE AVE NW  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D  
Name: CHAFFIN, JERRY W  
Address: 121 CARLISLE AVE NW  
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby 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 all other like empowered.

SIGNATURE: CHERYL ALLEN

P

04/25/2011

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

\_\_\_\_\_  
Date