

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000038731

FILED
Jan 15, 2008
Secretary of State

Entity Name: CDC II JOINT VENTURE, INC.

Current Principal Place of Business:

12846 US HWY 301 S
DADE CITY, FL 33523

New Principal Place of Business:

Current Mailing Address:

12846 US HWY 301 S
DADE CITY, FL 33523

New Mailing Address:

FEI Number: 14-1955484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCKIE, CHARLIE JR,ESQ
38056 MERIDIAN AVE
DADE CITY, FL 33523 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: P () Delete
Name: SACKS, VICTORIA L
Address: 39768 MEADOWOOD LOOP
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP () Delete
Name: MACE, JAMES F
Address: 39768 MEADOWOOD LOOP
City-St-Zip: ZEPHYRHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SACKS, VICTORIA L
Address: 40410 RIVER ROAD
City-St-Zip: DADE CITY, FL 33525

Title: VP (X) Change () Addition
Name: MACE, JAMES F
Address: 40410 RIVER ROAD
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: JAMES MACE

V.P.

01/15/2008

Electronic Signature of Signing Officer or Director

Date