2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000097851

Entity Name: CARTRIDGE COLLECTIONS, INC.

FILED Apr 29, 2009 Secretary of State

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

2225 HOMEWOOD DRIVE 13882 OSPREY LINKS RD ORLANDO, FL 32809

74

ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

2225 HOMEWOOD DRIVE 13882 OSPREY LINKS RD ORLANDO, FL 32809

ORLANDO, FL 32837

FEI Number: 20-5422806 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:

MCCORMACK, KENNETH R MCCORMACK, KENNETH R 2225 HOMEWOOD DRIVE 13882 OSPREY LINKS RD ORLANDO, FL 32809 74 ORLANDO, FL 32837 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: 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

VPD

Title:

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition PIETERSE, EUGENE PIETERSE, EUGENE Name: 2225 HOMEWOOD DRIVE 13882 OSPREY LINKS RD Address:

Title:

VPD

ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32837

(X) Change () Addition () Delete MCCORMACK, KENNETH MCCORMACK, KENNETH Name: Name: 2225 HOMEWOOD DRIVE 13882 OSPREY LINKS RD, #74 Address: Address:

ORLANDO, FL 32809 ORLANDO, FL 32837 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition SD SD PIETERSE, CANDICE PIETERSE, CANDICE Name: Name:

2225 HOMEWOOD DRIVE 13882 OSPREY LINKS RD, #74 Address: Address:

City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32837

Title: () Delete Title: (X) Change () Addition MCCORMACK, MARIA MCCORMACK, MARIA Name: Name: Address: 2225 HOMEWOOD DRIVE Address: 13882 OSPREY LINKS RD, #74

City-St-Zip: City-St-Zip: ORLANDO, FL 32809 ORLANDO, FL 32837

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: EUGENE PIETERSE MR 04/29/2009