## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000118319

Entity Name: CPTG FLORIDA, INC.

FILED Sep 05, 2007 Secretary of State

Current B	rincinal Place	of Rusinoss:	ſ	Now Principal Place	of Rucinose:	
Current Principal Place of Business:				New Principal Place of Business:		
7150 EAST CAMELBACK ROAD SUITE 444				515 E CAREFREE HIGHWAY #835		
SCOTTSDALE, AZ 85251 US				PHOENIX, AZ 85085	US	
Current Mailing Address:				New Mailing Address:		
3956 TOWN CENTER BLVD ORLANDO, FL 32837 US				3956 TOWN CENTER BLVD		
				#290 ORLANDO, FL 32837	US	
FEI Number: 20-5544864 FEI Number Applied For ( )		FEI Numi	ber Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
2731 EXEC SUITE 4	RVICES, INC. CUTIVE PARK , FL 33331 U					
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of	changing its registered	office or registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	VP&D ( ENCK, GLEN 726 INDIANA / LEMOYNE, PA		1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP&D ( BALDWIN, WII 7913 NW 11TH VANCOUVER,	I CT	1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP&D ( ) Delete WILSON, NATHAN 515 E CAREFREE HIGHWAY #835 ip: PHOENIX, AZ 85085 US			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D (X CALL LOGIC, I #5 CENTERPO		1	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: NATHAN D. WILSON MR. 09/05/2007

LAKE OSWEGO, OR 97035 US

City-St-Zip: