2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000132598

Entity Name: CALDER'S ENTERPRISES, INC.

FILED Mar 30, 2009 Secretary of State

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

11218 SPRING HILL DRIVE SPRING HILL, FL 34609 US

Current Mailing Address: New Mailing Address:

11186 SPRING HILL DRIVE 11218 SPRING HILL DR BOX #216 SPRING HILL, FL 34609 US

FEI Number: 20-5728350 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:

SIMMONS, CALDER A

11186 SPRING HILL DRIVE

BOX #216

SPRING HILL, FL 34609 US

SPRING HILL, FL 34609 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: CALDER A SIMMONS 03/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: SIMMONS, CALDER A SIMMONS, CALDER A

 Address:
 11186 SPRING HILL DRIVE, #216
 Address:
 11218 SPRING HILL DR

 City-St-Zip:
 SPRING HILL, FL 34609 US
 City-St-Zip:
 SPRING HILL, FL 34609 US

Title: VP () Delete Title: VP (X) Change () Addition Name: SIMMONS, SCOTT A SIMMONS, SCOTT A

Name: SIMMONS, SCOTT A
Address: 11186 SPRING HILL DRIVE, #216
City-St-Zip: SPRING HILL, FL 34609 US
Address: SIMMONS, SCOTT A
Address: 11218 SPRING HILL DRIVE,
City-St-Zip: SPRING HILL, FL 34609 US
SPRING HILL, FL 34609 US

 $\label{eq:title:state} \mbox{Title:} \qquad \mbox{S,T} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{S,T} \qquad \mbox{(X) Change () Addition}$

Name:SIMMONS, VALERIE SName:SIMMONS, VALERIE SAddress:11186 SPRING HILL DRIVE, #216Address:11218 SPRING HILL DRIVECity-St-Zip:SPRING HILL, FL 34609 USCity-St-Zip:SPRING HILL, FL 34609 US

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: CALDER A SIMMONS PRES 03/30/2009