## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000026295

FILED Mar 31, 2009 Secretary of State

Current F	Principal Place	e of Business:	New Principal Place	e of Business:
	NERS AVE. FL 34108			
Current N	lailing Addre	ss:	New Mailing Addres	ss:
PO BOX 7 NAPLES,	770451 FL 34107			
El Number	: 20-8524102	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
C	/LER B ESQ			
5150 NOF SUITE 30: NAPLES, The above	RTH TAMIAMI <sup>*</sup> 2 FL 34103 US		purpose of changing its registere	ed office or registered agent, or both,
5150 NOF SUITE 30: NAPLES, The above	RTH TAMIAMI 2 2 FL 34103 US e named entity e of Florida. RE:	submits this statement for the		
5150 NOF SUITE 30: NAPLES, The above n the Stat BIGNATU	RTH TAMIAMI 2 FL 34103 US e named entity e of Florida.  RE: Electro	submits this statement for the		ed office or registered agent, or both,  Date
5150 NOF SUITE 30: NAPLES, The above n the Stat BIGNATU	RTH TAMIAMI 2 FL 34103 US e named entity e of Florida.  RE: Electro	submits this statement for the		
5150 NOF SUITE 30: NAPLES, The above n the Stat BIGNATU	RTH TAMIAMI 2 FL 34103 US e named entity e of Florida.  RE: Electro	submits this statement for the nic Signature of Registered Ages of Trust Fund Contribution ( ).	gent	
5150 NOF SUITE 30: NAPLES, The above n the Stat BIGNATU	RTH TAMIAMI 2 FL 34103 US e named entity e of Florida.  RE: Electro mpaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Ang Trust Fund Contribution ( ).  CTORS:  ) Delete DAVID L CO-PRES S AVENUE	gent	Date

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: DAVID BELSINGER COPR 03/31/2009