

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076907

FILED
May 04, 2010
Secretary of State

Entity Name: CORINE'S 24/7 BAIL BONDS, INC.

Current Principal Place of Business:

5439 EMERALD REEF CT
JACKSONVILLE, FL 32277

New Principal Place of Business:

1268 EDGEWOOD AVE
SUITE 2
JACKSONVILLE, FL 32208

Current Mailing Address:

5439 EMERALD REEF CT
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 65-1311490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, CORINE
5439 EMERALD REEF CT
JACKSONVILLE, FL 32277 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: MOORE, CORINE
Address: 5439 EMERALD REEF CT
City-St-Zip: JACKSONVILLE, FL 32277

Title: P
Name: PETERSON, SHERRIA
Address: 5439 EMERALD REEF CT
City-St-Zip: JACKSONVILLE, FL 32277

Title: ST
Name: WILSON, DONTRELL
Address: 5439 EMERALD REEF CT
City-St-Zip: JACKSONVILLE, FL 32277

I hereby 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 all other like empowered.

SIGNATURE: CORINE MOORE

D

05/04/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date