

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117495

FILED
Mar 17, 2009
Secretary of State

Entity Name: CONCH REPUBLIC BUSINESS VENTURES, INC.

Current Principal Place of Business:

120 SAN REMO
ISLAMORADA, FL 33036 US

New Principal Place of Business:

2372 N. HIGHWAY A1A
INDIATLANTIC, FL 32937 US

Current Mailing Address:

120 SAN REMO
ISLAMORADA, FL 33036 US

New Mailing Address:

385 POINT LOBOS DRIVE
SATELLITE BEACH, FL 32937 US

FEI Number: 30-0449476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONE, DEBRA
120 SAN REMO
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

MALONE, DEBRA
385 POINT LOBOS DRIVE
SATELLITE BEACH, FL 32937 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:

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HALL, DAVID
Address: 138 VENETIAN WAY
City-St-Zip: ISLAMORADA, FL 33036 US

Title: TRES () Delete
Name: HALL, DAVID
Address: 120 SAN REMO
City-St-Zip: ISLAMORADA, FL 33036 US

Title: SEC () Delete
Name: HALL, DAVID
Address: 138 VENETIAN WAY
City-St-Zip: ISLAMORADA, FL 33036 US

Title: DIR () Delete
Name: HALL, DAVID
Address: 138 VENETIAN WAY
City-St-Zip: ISLAMORADA, FL 33036 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MALONE, MICHAEL
Address: 385 POINT LOBOS DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MALONE, MICHAEL
Address: 385 POINT LOBOS DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: SEC (X) Change () Addition
Name: MALONE, MICHAEL
Address: 385 POINT LOBOS DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 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: MICHAEL MALONE

MM

03/17/2009

Electronic Signature of Signing Officer or Director

Date