

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000014135

FILED
Feb 08, 2009
Secretary of State

Entity Name: CAPTAIN COMEBACK ENTERPRISES, INC.

Current Principal Place of Business:

220 HENTHORNE DRIVE, #C-15
PALM SPRINGS, FL 33461

New Principal Place of Business:

220 HENTHORNE DRIVE, #C-15
PALM SPRINGS, FL 33461 US

Current Mailing Address:

220 HENTHORNE DRIVE, #C-15
PALM SPRINGS, FL 33461

New Mailing Address:

220 HENTHORNE DRIVE, #C-15
PALM SPRINGS, FL 33461 US

FEI Number: 26-1636620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYTAL, STEVEN
220 HENTHORNE DRIVE, #C-15
PALM SPRINGS, FL 33461 US

Name and Address of New Registered Agent:

LYTAL, STEVEN J
220 HENTHORNE DRIVE, #C-15
PALM SPRINGS, FL 33461 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: STEVEN J LYTAL

02/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: LYTAL, STEVEN
Address: 220 HENTHORNE DRIVE, #C-15
City-St-Zip: PALM SPRINGS, FL 33461

Title: TS () Delete
Name: LYTAL, STEVEN
Address: 220 HENTHORNE DRIVE, #C-15
City-St-Zip: PALM SPRINGS, FL 33461

Title: D () Delete
Name: LYTAL, APRILDAY
Address: 220 HENTHORNE DRIVE, #C-15
City-St-Zip: PALM SPRINGS, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: LYTAL, STEVEN J
Address: 220 HENTHORNE DRIVE, #C-15
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: TS (X) Change () Addition
Name: LYTAL, STEVEN J
Address: 220 HENTHORNE DRIVE, #C-15
City-St-Zip: PALM SPRINGS, FL 33461

Title: D (X) Change () Addition
Name: LYTAL, APRILDAY M
Address: 220 HENTHORNE DRIVE, #C-15
City-St-Zip: PALM SPRINGS, FL 33461

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: STEVEN J LYTAL

PRES

02/08/2009

Electronic Signature of Signing Officer or Director

Date