

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000021419

FILED
Jun 29, 2009
Secretary of State

Entity Name: PAIGE SUBS OF ESTERO INCORPORATED

Current Principal Place of Business:

9009 IRVING RD.
FT. MYERS, FL 33967

New Principal Place of Business:

9099 IRVING RD.
FT. MYERS, FL 33967

Current Mailing Address:

9009 IRVING RD.
FT. MYERS, FL 33967

New Mailing Address:

9099 IRVING RD.
FT. MYERS, FL 33967

FEI Number: 74-3251966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAIGE, BRETT
9009 IRVING RD.
FT. MYERS, FL 33967 US

Name and Address of New Registered Agent:

PAIGE, BRETT
9099 IRVING RD.
FT. MYERS, FL 33967 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: _____

Electronic Signature of Registered Agent

06/29/2009

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: DP () Delete
Name: PAIGE, BRETT
Address: 9009 IRVING RD.
City-St-Zip: FT. MYERS, FL 33967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PAIGE, BRETT
Address: 9099 IRVING RD.
City-St-Zip: FT. MYERS, FL 33967

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: BRETT PAIGE

DP

06/29/2009

Electronic Signature of Signing Officer or Director

Date