

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026184

FILED  
Sep 15, 2009  
Secretary of State

Entity Name: CAPITAL MARKET GROUP, INC.

## Current Principal Place of Business:

2202 NORTH WEST SHORE BLVD.  
200  
TAMPA, FL 33607

## New Principal Place of Business:

## Current Mailing Address:

2202 NORTH WEST SHORE BLVD.  
200  
TAMPA, FL 33607

## New Mailing Address:

FEI Number: 26-2166123      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CURTIS, DEDRA L  
660 JACKSON AVENUE  
106  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

OVERLIN, PHILIP M  
238 SAINT EUSEBIA STREET  
PENSACOLA, FL 32503 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: PHILIP OVERLIN

09/15/2009

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: P/D ( ) Delete  
Name: HORTON, EVAN  
Address: 2202 NORTH WEST SHORE BLVD. SUITE 200  
City-St-Zip: TAMPA, FL 33607

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HORTON, EVAN  
Address: 238 SAINT EUSEBIA STREET  
City-St-Zip: PENSACOLA, FL 32503

Title: S ( ) Change (X) Addition  
Name: OVERLIN, PHILIP M  
Address: 238 SAINT EUSEBIA STREET  
City-St-Zip: PENSACOLA, FL 32503

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: PHILIP OVERLIN

S

09/15/2009

Electronic Signature of Signing Officer or Director

Date