2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000049999

Entity Name: CAFFIEND, INC.

Title:

Name:

Address: City-St-Zip: (X) Delete

JONES, JAN

460 WALKER STREET

HOLLY HILL, FL 32117 US

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 460 WALKER STREET HOLLY HILL, FL 32117 FL **Current Mailing Address: New Mailing Address:** 460 WALKER STREET HOLLY HILL, FL 32117 FL FEI Number: 45-0596238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EBBETS, CHOBEE 210 SOUTH BEACH STREET SUITE 200 DAYTONA BEACH, FL 32114 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition JONES, WILLIAM H JR Name: Name: 460 WALKER STREET Address: Address: City-St-Zip: HOLLY HILL, FL 32117 US City-St-Zip: Title: Title: () Change () Addition (X) Delete Name: JONES, JAN Name: 460 WALKER STREET Address: Address: HOLLY HILL, FL 32117 US City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: WILLIAM H JONES, JR. 03/04/2009

() Change () Addition