## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000081662

Title:

Name:

Address:

City-St-Zip:

FILED Apr 04, 2009 Secretary of State

Entity Nar	me: ECCR IN	TERNATIONAL, INC.				·	
Current Principal Place of Business:				New Principal Place of Business:			
	61ST STREET AHA, FL 32179						
Current Mailing Address:				New Mailing Address:			
	61ST STREET AHA, FL 32179						
FEI Number:	: 94-3439620	FEI Number Applied Fe	or ( ) FEI Nu	mber Not Appl	licable ( )	Certificate of Status De	sired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	AYR 61ST STREET AHA, FL 32179						
The above in the State	named entity s of Florida.	submits this statement	for the purpose of	of changing i	ts registered o	office or registered age	ent, or both,
SIGNATUF	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financing	Trust Fund Contribution	n ( ).				
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANGES	TO OFFICERS AND	DIRECTORS
Title: Name: Address: City-St-Zip: Title:	HUNTER, KENN 12187 SE 100T BELLEVIEW, F	H COURT L 34420 US Delete		Title: Name: Address: City-St-Zip: Title:	RAWLS, JAME 14570 SE 61ST OCKLAWAHA, VP (X	T STREET ROAD FL 32179 US ) Change ( ) Addition	
Name: Address: City-St-Zip:	RAWLS, KAY R 14570 SE 61ST OCKLAWAHA, I	STREET ROAD		Name: Address: City-St-Zip:	RAWLS, KAY F 14570 SE 61ST OCKLAWAHA,	T STREET ROAD	
Title: Name: Address: City-St-Zip:	RAWLS, JAMES	STREET ROAD		Title: Name: Address: City-St-Zip:	RAWLS, KAY F	T STREET ROAD	

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:

TREA

RAWLS, KAY R

14570 SE 61ST STREET ROAD

OCKLAWAHA, FL 32179 US

( ) Change (X) Addition

SIGNATURE: DR. JAMES R. RAWLS PRES 04/04/2009

() Delete