

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000110944

FILED
Jan 06, 2011
Secretary of State

Entity Name: CAPITAL AREA TECHNOLOGY & REALTOR SERVICES, INC.

Current Principal Place of Business:

1029 THOMASVILLE ROAD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

1029 THOMASVILLE ROAD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 26-3915197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUCHHEIM, STEVEN J
1029 THOMASVILLE ROAD
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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:

Title: CH
Name: KIRKLAND, DEBBIE
Address: 8312 INNSBROOK DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: DIR
Name: DOXSEE, JEFF
Address: 4633 SPARROW HAWK CT
City-St-Zip: TALLAHASSEE, FL 32309

Title: T
Name: LOUCHHEIM, STEVEN J
Address: 5415 APPLIEDORE LANE
City-St-Zip: TALLAHASSEE, FL 32303

Title: DIR
Name: ROEDER, RAE
Address: 1224 NORTH ADAMS
City-St-Zip: TALLAHASSEE, FL 32303

Title: DIR
Name: BEVIS, BERT
Address: 3203 RIDGELAND COURT
City-St-Zip: TALLAHASSEE, FL 32312

Title: DIR
Name: PIERCE, CARYL
Address: 815 E. 6TH AVENUE
City-St-Zip: TALLAHASSEE, FL 32303

I hereby 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 all other like empowered.

SIGNATURE: STEVEN J LOUCHHEIM

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01/06/2011

Electronic Signature of Signing Officer or Director

Date