2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# P93000086615

Entity Name: CLRM INVESTMENT CO.

Current Principal Place of Business:

631 W. MORSE BLVD.
SUITE 125
WINTER PARK, FL 32789

New Principal Place of Business:

400 N. NEW YORK AVE.
SUITE 105
WINTER PARK, FL 32789

Current Mailing Address:

PO BOX 2635
WINTER PARK, FL 32790

New Mailing Address:

FEI Number: 59-3215054 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTER, BYRON R
631 W. MORSE BLVD.
SUITE 125
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

CARTER, BYRON R MR
400 N. NEW YORK AVE.
SUITE 105
WINTER PARK, FL 32789 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: BYRON R. CARTER 02/06/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: CARTER, BYRON R
Address: 631 W. MORSE BLVD. SUITE 125
City-St-Zip: WINTER PARK, FL 32789

Title: VP ( ) Delete
Name: CARTER, BYRON N
Address: 631 W. MORSE BLVD.
City-St-Zip: WINTER PARK, FL 32789

Title: S ( ) Delete
Name: CARTER, BYRON N
Address: 631 W. MORSE BLVD.
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: CARTER, BYRON R MR
Address: 400 N. NEW YORK AVE. SUITE 105
City-St-Zip: WINTER PARK, FL 32789

Title: VP (X) Change ( ) Addition
Name: CARTER, BYRON N MR
Address: 400 N. NEW YORK AVE. SUITE 105
City-St-Zip: WINTER PARK, FL 32789

Title: S (X) Change ( ) Addition
Name: CARTER, BYRON N MR
Address: 400 N. NEW YORK AVE. SUITE 105
City-St-Zip: WINTER PARK, FL 32789

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: BYRON R. CARTER P 02/06/2009
Electronic Signature of Signing Officer or Director Date