2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000038665

City-St-Zip:

SPRING HILL, FL

FILED Jan 15, 2009 Secretary of State

Entity Name: CBC RE	ELIABLE ENTERPRISES, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
19225 HIAWATHA ROA ODESSA, FL 33556	AD			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
19225 HIAWATHA ROA ODESSA, FL 33556	AD			
FEI Number: 59-3313777	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
DEPERTE, ROBERT F. 19225 HIAWATHA RD ODESSA, FL 33556	US			
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	

Title: () Delete Title: (X) Change () Addition DEPERTE, ANNMARIE DEPERTE, ANNMARIE Name: Name: 19225 HIAWATHA ROAD Address: 19225 HIAWATHA ROAD Address: City-St-Zip: ODESSA, FL City-St-Zip: ODESSA, FL 33556 Title: () Delete Title: (X) Change () Addition DEPERTE, ROBERT F. DEPERTE, ROBERT F. Name: Name: Address: 19225 HIAWATHA ROAD Address: 19225 HIAWATHA ROAD ODESSA, FL ODESSA, FL 33556 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition Name: BABCOCK, ARTHUR Name: BABCOCK, ARTHUR Address: 13310 LAWRENCE ST Address: 13310 LAWRENCE ST

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.

City-St-Zip:

SPRING HILL, FL 33556

SIGNATURE: ROBERT F. DEPERTE P. 01/15/2009