

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089383

FILED
Aug 05, 2008
Secretary of State

Entity Name: ALBERT CUMMINGS ENTERPRISES, INC.

Current Principal Place of Business:

1607- 16TH AVE E
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

1607 16TH AVENUE EAST
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 65-0626731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CUMMINGS, ALBERT JR
1607 16TH AVENUE EAST
PALMETTO, FL 34221 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUMMINGS, JESSIE
Address: 1607 16TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: VPD () Delete
Name: CUMMINGS, DWAYNE
Address: 1607 16TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: SD () Delete
Name: CUMMINGS, ALBERT JR.
Address: 1607 16TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: TD () Delete
Name: CUMMINGS, ALBERT SR.
Address: 1607 16TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: JESSIE CUMMINGS

PD

08/05/2008

Electronic Signature of Signing Officer or Director

Date