

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025458

Entity Name: CALM LAKE TREES, INC.

FILED  
Mar 09, 2009  
Secretary of State

**Current Principal Place of Business:**

8620 TARPON SPRINGS ROAD  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 727  
ODESSA, FL 33556

**New Mailing Address:**

FEI Number: 65-0657539

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PREVATT, KAREN J  
1200 W PLATT ST  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

PREVATT, KAREN J  
137 SO PEBBLE BEACH BLVD  
SUITE 102  
SUN CITY CENTER, FL 33573 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/09/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MAGHAN, NONA  
Address: P.O. BOX 727 N/A  
City-St-Zip: ODESSA, FL 33556

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: NONA MAGHAN

Electronic Signature of Signing Officer or Director

PRES

03/09/2009

Date