2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 15, 2009
Secretary of State

DOCUMENT# P97000041580

Entity Name: ESFORMES PROPERTIES, INC.

Current Principal Place of Business:

503 10TH STREET WEST
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

503 10TH STREET WEST
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 65-0763535 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE ACCESS, INC.
236 EAST 6 AVENUE
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: D ( ) Delete
Name: ESFORMES-ALVEREZ, ELIZABETH
Address: 503 10TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change ( ) Addition
Name: ESFORMES, JOSEPH J
Address: 503 10TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

Title: DSVP ( ) Change (X) Addition
Name: ESFORMES, JOSEPH E
Address: 503 10TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

Title: DVPS ( ) Change (X) Addition
Name: ESFORMES-ALVEREZ, ELIZABETH
Address: 503 10TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

Title: T ( ) Change (X) Addition
Name: BOYER, WILLIAM T
Address: 503 10TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

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: ELIZABETH ESFORMES-ALVEREZ DVPS 06/15/2009

Electronic Signature of Signing Officer or Director — Date