

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000108313

FILED
Jan 08, 2009
Secretary of State

Entity Name: COPY CONTROL MANAGEMENT, INC.

Current Principal Place of Business:

5021 W. RIO VISTA AVE.
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

5021 W. RIO VISTA AVE.
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-7114115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAYO, ROBERT D
5021 W. RIO VISTA AVE.
TAMPA, FL 33634 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: P () Delete
Name: CAYO, ROBERT D
Address: 5021 W. RIO VISTA AVE.
City-St-Zip: TAMPA, FL 33634 US

Title: CEO () Delete
Name: CAYO, DONALD F
Address: 7931 LAKE ST. JAMES LANE
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: BRENER, JON S
Address: 606 REGENT PARK DR.
City-St-Zip: MT. JULIET, TN 37122

Title: VP () Delete
Name: STARACE, ROBERT P
Address: 2841 PARK MEADOW DR.
City-St-Zip: VALRICO, FL 33594

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: ROBERT D. CAYO

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date