

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90088 019 ***150.00

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1. Entity Name

CIVIL SOLUTIONS, INC.

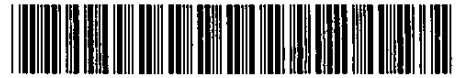


Principal Place of Business

14155 U.S. HWY. ONE, STE. 200
JUNO BEACH FL 33408

Mailing Address

14155 U.S. HWY. ONE, STE. 200
JUNO BEACH FL 33408



2. Principal Place of Business

14255 U.S. HWY. ONE

Suite, Apt. #, etc.

STE. 2180

City & State

JUNO BEACH, FL

Zip

33408

Country

3. Mailing Address

14255 U.S. HWY. ONE

Suite, Apt. #, etc.

STE. 2180

City & State

JUNO BEACH, FL

Zip

33408

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0901760

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SOVA, CHERIE
14155 U.S. HWY. ONE, STE. 200
JUNO BEACH FL 33408

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

14255 U.S. HWY. ONE

SUITE 2180

City

JUNO BEACH

FL

Zip Code

33408

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00.

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME SOVA, CHERIE
STREET ADDRESS 14155 U.S. HWY. ONE, STE. 200
CITY-ST-ZIP JUNO BEACH FL 33408

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 14255 U.S. HWY. ONE, SUITE 2180
CITY-ST-ZIP JUNO BEACH, FLORIDA 33408

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cherie Sova, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/06 (561) 630-16735
Date Daytime Phone #