

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040150

Entity Name: CUMM PARTNERS, INC.

FILED  
Apr 26, 2007  
Secretary of State

## Current Principal Place of Business:

779 SW 13 COURT  
POMPAÑO BEACH, FL 33060

## New Principal Place of Business:

## Current Mailing Address:

779 SW 13 COURT  
POMPAÑO BEACH, FL 33060

## New Mailing Address:

FEI Number: 65-0919257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CUMMINGS, HILDAMAR  
272 E WILDWOOD LN  
DEERFIELD BEACH, FL 33442 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: D ( ) Delete  
Name: CUMMINGS, HILDAMAR  
Address: 272 E WILDWOOD LN  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D ( ) Delete  
Name: CUMMINGS, KEITH  
Address: 526 E WILDWOOD LN  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D ( ) Delete  
Name: CUMMINGS, HOWARD  
Address: 272 E WILDWOOD LN  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D ( ) Delete  
Name: CUMMINGS, CHRIS  
Address: 1534 VER CRUZ LANE  
City-St-Zip: WESTON, FL 33323

Title: D ( ) Delete  
Name: CUMMINGS, PHILLIP  
Address: 12103 NW 19 ST  
City-St-Zip: FORT LAUDERDALE, FL 33323

## 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: D (X) Change ( ) Addition  
Name: CUMMINGS, CHRIS  
Address: 1534 VER ACROZ LANE  
City-St-Zip: WESTON, FL 33323

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HOWARD CUMMINGS

D

04/26/2007

Electronic Signature of Signing Officer or Director

Date