

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056471

FILED
Apr 07, 2009
Secretary of State

Entity Name: CONSTRUCTION CENTRAL ART, INC.

Current Principal Place of Business:

170 SUNPORT LANE
SUITE 900
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

170 SUNPORT LANE
SUITE 900
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3586753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOMEZ, OCTAVIO
170 SUNPORT LANE
SUITE 900
ORLANDO, FL 32809 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: GOMEZ, OCTAVIO
Address: 170 SUNPORT LANE, SUITE 900
City-St-Zip: ORLANDO, FL 32809

Title: V () Delete
Name: STUART, LARRY
Address: 170 SUNPORT LANE, SUITE 900
City-St-Zip: ORLANDO, FL 32809

Title: V () Delete
Name: THOMAS, JAMES L
Address: 170 SUNPORT LANE, SUITE 900
City-St-Zip: ORLANDO, FL 32809

Title: T () Delete
Name: GRAY, DAVID E
Address: 170 SUNPORT LANE, SUITE 900
City-St-Zip: ORLANDO, FL 32809

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: OCTAVIO GOMEZ

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date