

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075979

FILED
Apr 09, 2009
Secretary of State

Entity Name: CONSUMER ENERGY SOLUTIONS, INC.

Current Principal Place of Business:

1315 CLEVELAND ST
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2454
CLEARWATER, FL 33757

New Mailing Address:

FEI Number: 59-3600276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, R. CARLTON
1253 PARK ST.
CLEARWATER, FL 33756 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: CEO () Delete
Name: CLOUDEN, PATRICK
Address: 111 MANATEE ROAD
City-St-Zip: BELLAIRE, FL 33756

Title: P () Delete
Name: MATHERS, JIM
Address: 100 PIERCE STREET, #510
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CLOUDEN, PATRICK
Address: 111 MANATEE ROAD
City-St-Zip: BELLAIRE, FL 33756

Title: VP (X) Change () Addition
Name: MATHERS, JIM
Address: 100 PIERCE STREET, #510
City-St-Zip: CLEARWATER, FL 33756

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: PATRICK CLOUDEN

PRES

04/09/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date