

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095129

Entity Name: CLO OF CENTRAL FLORIDA, INCORPORATED

FILED  
Apr 23, 2008  
Secretary of State

**Current Principal Place of Business:**

1200 BOCA CIEGA ISLES DRIVE  
ST. PETERSBURG, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

1200 BOCA CIEGA ISLE DRIVE  
ST. PETERSBURG, FL 33706

**New Mailing Address:**

FEI Number: 59-3582513      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OATES, PATRICIA  
1200 BOCA CIEGA ISLE DRIVE  
ST. PETERSBURG, FL 33706 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: OATES, PATRICIA S

Address: 1200 BOCA CIEGA ISLE DRIVE

City-St-Zip: SAINT PETERSBURG, FL 33706

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: PATRICIA OATES

PRES

04/23/2008

Electronic Signature of Signing Officer or Director

Date