

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000102065

Entity Name: CONTENTO, INC.

FILED
Mar 12, 2009
Secretary of State

Current Principal Place of Business:

73 S PALM AVE STE 219
SARASOTA, FL 34236

New Principal Place of Business:

73 S. PALM AVENUE, SUITE 214
SARASOTA, FL 34236

Current Mailing Address:

73 S PALM AVE STE 219
SARASOTA, FL 34236

New Mailing Address:

73 S. PALM AVENUE, SUITE 214
SARASOTA, FL 34236

FEI Number: 65-0996541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOAF, MARGARET
2100 S. TAMIAMI TR, STE 200
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

SHOAF, MARGARET
2100 S. TAMIAMI TRAIL, SUITE 200
SARASOTA, FL 34239 US

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:

03/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVPS () Delete
Name: GERTRAUD, HAYDN
Address: 786 S. ORANGE AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: DP () Delete
Name: HAYDN, RUPERT
Address: 786 S ORANGE AVE.
City-St-Zip: SARASOTA, FL 34236

Title: VP () Delete
Name: CHARITY, GABRIELE
Address: 623 AVENIDA DEL NORTE
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVPS (X) Change () Addition
Name: HAYDN, GERTRAUD
Address: 73 S. PALM AVENUE, SUITE 214
City-St-Zip: SARASOTA, FL 34236

Title: DP (X) Change () Addition
Name: HAYDN, RUPERT
Address: 73 S. PALM AVENUE, SUITE 214
City-St-Zip: SARASOTA, FL 34236

Title: VP (X) Change () Addition
Name: CHARITY, GABRIELE
Address: 73 S. PALM AVENUE, SUITE 214
City-St-Zip: SARASOTA, FL 34236

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: GABRIELE CHARITY

VP

03/12/2009

Electronic Signature of Signing Officer or Director

Date