

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107721

FILED
Apr 22, 2009
Secretary of State

Entity Name: C & M INVESTMENTS OF POLK COUNTY, INC.

Current Principal Place of Business:

306 ARROW ROOT RD
WINTER HAVEN, FL 33880

New Principal Place of Business:

306 ARROW ROOT RD
EAGLE LAKE, FL 33839

Current Mailing Address:

P.O. BOX 778
EAGLE LAKE, FL 33839

New Mailing Address:

FEI Number: 59-3616699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHORETTE, MICHAEL C
227 LILY PAD ROAD
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

SHORETTE, MICHAEL C
227 LILY PAD ROAD
EAGLE LAKE, FL 33839 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: MICHAEL SHORETTE

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHORETTE, MICHAEL C
Address: 227 LILLY PAD LANE
City-St-Zip: WINTER HAVEN, FL 33880

Title: AVP (X) Delete
Name: SHORETTE, THADDEUS
Address: 117 WEEPING WILLOW ROAD
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHORETTE, MICHAEL C
Address: 227 LILLY PAD LANE
City-St-Zip: EAGLE LAKE, FL 33839

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: MICHAEL SHORETTE

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date