

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S12620

Entity Name: CITY NIGHTS VALET, INC.

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6751 FORUM DR STE 230  
ORLANDO, FL 32821 US

**New Principal Place of Business:**

**Current Mailing Address:**

6751 FORUM DR STE 230  
ORLANDO, FL 32821 US

**New Mailing Address:**

FEI Number: 59-3043058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATEER, CRAIG  
6751 FORUM DR.  
SUITE 230  
ORLANDO, FL 32821 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

**OFFICERS AND DIRECTORS:**

Title: MGR  
Name: MATEER, CRAIG  
Address: 6751 FORUM DR STE 230  
City-St-Zip: ORLANDO, FL 32821

I hereby 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 all other like empowered.

SIGNATURE: CRAIG MATEER

MGR

03/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date