2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 10, 2008 8:00 am Secretary of State 04-10-2008 90015 024 ***150.00

DOCUMENT # S75429 1. Entity Name CORPORATE PROPERTY RESOURCES, INC.								04-10-2008	90015 02	24 ***150	0.00	
Principal Place of Business 1345 MAIN ST C-2 SARASOTA, FL 34236 US			13 C-	Mailing Address 1345 MAIN ST C-2 SARASOTA, FL 34236 US				S JETRA BIJIN KURIR SUKU JA	el Birbit B1814 B16	21 B(81) B(8)) G(B)	IVERA II JERI	
2. Principal Place of Business - No P.O. Box # 3			3. N	3. Mailing Address			_					
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.			02202008	Chg-P	CR2E0	34 (12/06)		
City & State				City & State			4. FEI Numb				plied For at Applicable	
Zip	Country		2	Zip	Cour	ntry	5. Certificate of Status Desired			\$8.75 Add Fee Required		
6. Name and Address of Current Regist				tered Agent	<u> </u>	Name	7. Name and	Address of New F	Registered A	gent		
MORAN, J	MORAN, JOHN A											
1990 MAIN STREET SUITE 700				Street Addres			s (P.O. Box Number is Not Acceptable)					
SARASOT		236										
						City			FL	Zip Code	Э	
		ty submits this statement for	or the p	urpose of changing i	ts register	ed office or registe	ered agent, or bo	oth, in the State of Fl	orida. I am l	amiliar with,	and accept	
the obligations of registered agent.												
SIGNATURĖ_	Signature, typed	d or printed name of registered agen	t and bile if	spolicable (NC	OTE: Registere	ed Agent signature require	ed when rainstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.							5.00 May Be ded to Fees					
10.		OFFICERS AND	DIREC		11.		ADDITIONS	/CHANGES TO OF	ICERS AND			
title Name	P DORE, S	TEPHEN W.		☐ Defete	TITL NAM	·				☐ Change	Addition	
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12. I hereby of indicated	certify that the on this report to the contraction or the contraction	ne information supplied wit ort or supplemental report the receiver or trustee emp jachment with an address	th this files true a	ling does not qualify and accurate and the type execute this sen	for the ex t my signa	remptions container sture shall have the sired by Chapter #0	ed in Chapter 11 same legal effe 27 Florida Statut	 Florida Statutes. ct as il made under es: and that my pen 	I further cert oath; that I a	iry that the ir im an officer n Block 10 o	ntormation or director r Block 11 if	
changed,	, or on an all	achment with an address	withall	other like empowere	200100	mod by Oliaptor OC		2/12/	uppuuis II] (. 5000 10 0	. 210011111	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Director Date Director Date Director Di												
	7	SIGNATURE AND TYPED OR	PRINTED	NAME OF STONING OFFICE	ER OR DIREC	CTOR		Date		Paylime Phone #		