


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 08:00 A
Secretary of State

DOCUMENT # V32773
 1. Entity Name
CLOSURE GROUP, INC.



Principal Place of Business 14101 RIVER ROAD FT. MYERS, FL 33905 US	Mailing Address 14101 RIVER ROAD FT. MYERS, FL 33905 US
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DO NOT WRITE IN THIS SPACE



04302007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0343366	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DORAGH, PETER D
 12800 UNIVERSITY DR # 600
 FORT MYERS, FL 33907

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000762013
 05/25/07-80079-021 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ARNOLD, J. KEITH 14101 RIVER ROAD FT. MYERS, FL 33905
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARNOLD, J. KEITH 14101 RIVER ROAD FORT MYERS, FL 33905
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **May 1, 2007** **239-694-8524**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #