

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S17091

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: C. G. B. M. T. ENTERPRISES, INC.

## Current Principal Place of Business:

145 KNOBBY VIEW DRIVE  
HIGHLAND, MI 48357

## New Principal Place of Business:

## Current Mailing Address:

145 KNOBBY VIEW DRIVE  
HIGHLAND, MI 48357

## New Mailing Address:

FEI Number: 65-0221932      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMPSON, RICARDO  
24602 STILBRIDGE CT  
LEESBURG, FL 34748      US

## Name and Address of New Registered Agent:

SIMPSON, RICHARD  
24602 STILBRIDGE CT  
LEESBURG, FL 34748      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: RICHARD SIMPSON

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GARAVAGLIA, MARY ANN PRES.  
Address: 145 KNOBBY VIEW DRIVE  
City-St-Zip: HIGHLAND, MI 48357

Title: VP ( ) Delete  
Name: GARAVAGLIA, CHARLES LEWIS  
Address: 148 KNOBBY VIEW DRIVE  
City-St-Zip: HIGHLAND, MI 48357

Title: V.P. ( ) Delete  
Name: GARAVAGLIA, CHARLES L  
Address: 4550 18TH AVE NW #2-207  
City-St-Zip: POMPANO BEACH, FL 33064

Title: V ( ) Delete  
Name: GARAVAGLIA, CHARLES J  
Address: 25419 LIBERTY LANE  
City-St-Zip: FARMINGTON, MI 48335

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: GARAVAGLIA, CHARLES L  
Address: 148 KNOBBY VIEW DRIVE  
City-St-Zip: HIGHLAND, MI 48357

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES GARAVAGLIA

V.P.

03/25/2009

Electronic Signature of Signing Officer or Director

Date