

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001991

FILED  
Aug 10, 2007  
Secretary of State

Entity Name: CAPITAL INVESTIGATIONS, INC.

**Current Principal Place of Business:**

5072 HILLSDALE CIRCLE #201  
EL DORADO HILLS, CA 95762

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1986  
SHINGLE SPRINGS, CA 95682

**New Mailing Address:**

FEI Number: 68-0470273      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CHRM ( ) Delete  
Name: RANDALL, BILL  
Address: 5072 HILLSDALE CIRCLE #201  
City-St-Zip: EL DORADO HILLS, CA 95762

Title: PST ( ) Delete  
Name: RANDALL, BILL  
Address: 5072 HILLSDALE CIRCLE #201  
City-St-Zip: EL DORADO HILLS, CA 95762

Title: VD ( ) Delete  
Name: CONWAY, PAUL  
Address: 204 G STREET #203  
City-St-Zip: PETALUMA, CA 94952

Title: VD ( ) Delete  
Name: CONWAY, TIM  
Address: 655 N. CENTRAL AVE 17TH FLOOR  
City-St-Zip: GLENDALE, CA 91203

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: BILL RANDALL

PRES

08/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date