

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003942

Entity Name: CABE ASSOCIATES, INC.

FILED  
Mar 30, 2010  
Secretary of State

**Current Principal Place of Business:**

144 SOUTH GOVERNORS AVENUE  
DOVER, DE 19904

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 877  
DOVER, DE 199030877

**New Mailing Address:**

FEI Number: 51-0187225      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: BEETSCHEN, LEE J  
Address: PO BOX 877  
City-St-Zip: DOVER, DE 199030877

Title: STD  
Name: KERR, ROBERT W  
Address: PO BOX 877  
City-St-Zip: DOVER, DE 199030877

Title: D  
Name: PARKOWSKI, F MICHAEL  
Address: PO BOX 598  
City-St-Zip: DOVER, DE 199030598

Title: VP  
Name: DOWNS, MARK K  
Address: PO BOX 877  
City-St-Zip: DOVER, DE 199030877

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: ROBERT W. KERR

ST

03/30/2010

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

\_\_\_\_\_ Date