

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000104993

Entity Name: C-2-C INVESTMENT, CO.

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1207 ORIOLE BEACH RD  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

1207 ORIOLE BEACH RD  
GULF BREEZE, FL 32563 UN

**Current Mailing Address:**

1207 ORIOLE BEACH RD  
GULF BREEZE, FL 32563

**New Mailing Address:**

1207 ORIOLE BEACH RD  
GULF BREEZE, FL 32563 UN

FEI Number: 59-3753067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PHELPS, CHARLES L  
1207 ORIOLE BEACH RD  
GULF BREEZE, FL 32563 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

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: PHELPS, CHARLES L  
Address: 1207 ORIOLE BEACH RD  
City-St-Zip: GULF BREEZE, FL 32563

Title: VT  
Name: PHELPS, MENA D  
Address: 1207 ORIOLE BEACH RD  
City-St-Zip: GULF BREEZE, FL 32563

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: CHARLES PHELPS

PS

01/05/2012

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

\_\_\_\_\_  
Date