

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000125465

Entity Name: CAPITAL CITY INC.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

2737 SOUTH ALDER STREET
PHILADELPHIA, PA 19148

New Principal Place of Business:

Current Mailing Address:

2737 SOUTH ALDER STREET
PHILADELPHIA, PA 19148

New Mailing Address:

FEI Number: 20-3596664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE SUITE 4
WESTON, FL 33331 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: P () Delete
Name: GALLELLI, PASQUALE
Address: 2737 SOUTH ALDER STREET
City-St-Zip: PHILADELPHIA, PA 19148

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: WILLIAMS, RICHARD
Address: PO BOX 532
City-St-Zip: BLACKWOOD, NJ 08012

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: PASQUALE GALLELLI

P

01/14/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date