


2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P06000045094

1. Entity Name
C-2-IT CLEANING & PERSONAL SERVICES, INC.



FILED
08 NOV 24 AM 10:59
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
775 GILDA DRIVE 775 GILDA DRIVE
ST AUGUSTINE, FL 32086 ST AUGUSTINE, FL 32086



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

05282008 Chg-P CR2E034 (12/06)

City & State City & State

4. FEI Number Applied For
20-4677659 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

KEENE, CYNTHIA E
775 GILDA DRIVE
ST AUGUSTINE, FL 32086

7. Name and Address of New Registered Agent

Name CYNTHIA A. JORDAN
Street Address (P.O. Box Number is Not Acceptable)
845 FAVER DYKES RD
City ST. AUGUSTINE FL Zip Code 32086

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Cynthia A. Jordan CYNTHIA A. JORDAN 1/1/2008
Signature typed or printed name of registered agent and fee applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

Amended AR is \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
	KEENE, CYNTHIA E	775 GILDA DRIVE	ST AUGUSTINE, FL 32086	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
PRES.	CYNTHIA A. JORDAN	845 FAVER DYKES RD	ST. AUG., FL. 32086	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cynthia A. Jordan 1/1/2008 (904)540-2897
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

11/25