

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000048136

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** A & E ASSOCIATES OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

15 W. STRONG ST.  
SUITE 10-C  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

15 W. STRONG ST.  
SUITE 10-C  
PENSACOLA, FL 32501

**New Mailing Address:**

**FEI Number:** 59-3661292      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

VALLETTO, CARL L  
1329 STERLING POINT PLACE  
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:** DP  
**Name:** VALLETTO, CARL L  
**Address:** 1329 STERLING POINT PL  
**City-St-Zip:** GULF BREEZE, FL 32563

**Title:** DVP  
**Name:** VALLETTO, CARL E  
**Address:** 923 BARCELONA ST  
**City-St-Zip:** PENSACOLA, FL 32501

**Title:** DST  
**Name:** VALLETTO, ANNETTE  
**Address:** 923 BARCELONA ST.  
**City-St-Zip:** PENSACOLA, FL 32501

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: ANNETTE VALLETTO

DST

04/24/2012

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

\_\_\_\_\_ Date