

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000156960

Entity Name: ALYCOLE INC.

**FILED**  
**Feb 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4012 CORTEZ RD W  
2103  
BRADENTON, FL 34210

**New Principal Place of Business:**

**Current Mailing Address:**

6455 GATEWAY AVE.  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: 20-5429152

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GANCITANO, TARA R  
6455 GATEWAY AVE  
SARASOTA, FL 34231 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: P  
Name: PARSONS, WILLIAM T  
Address: 6455 GATEWAY AVE  
City-St-Zip: SARASOTA, FL 34231 US

Title: VP  
Name: PARSONS, CHRISTOPHER T  
Address: 6455 GATEWAY AVE  
City-St-Zip: SARASOTA, FL 34231 US

Title: TRES  
Name: PARSONS, TERESA C  
Address: 6455 GATEWAY AVE  
City-St-Zip: SARASOTA, FL 34231

Title: DIR  
Name: PARSONS, VALERIE K  
Address: 6455 GATEWAY AVE  
City-St-Zip: SARASOTA, FL 34231

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: WILLIAM T PARSONS

P

02/20/2011

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

\_\_\_\_\_  
Date