

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000124772

**Entity Name:** CONSUMER WARNING NETWORK, INC.

**Current Principal Place of Business:**

4830 W. KENNEDY BLVD.  
SUITE 550  
TAMPA, FL 33609

**Current Mailing Address:**

4830 W. KENNEDY BLVD.  
SUITE 550  
TAMPA, FL 33609

**FEI Number:** 57-1141091

**Certificate of Status Desired:** No

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

HOYER, WILLIAM C  
4830 W. KENNEDY BLVD.  
SUITE 550  
TAMPA, FL 33609 US

*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

**Officer/Director Detail :**

Title D  
Name HOYER, WILLIAM C  
Address 4830 W. KENNEDY BLVD., SUITE 550  
City-State-Zip: TAMPA FL 33609

Title PVST  
Name HOYER, WILLIAM C  
Address 4830 W. KENNEDY BLVD., SUITE 550  
City-State-Zip: TAMPA FL 33609

*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:** HOYER, WILLIAM, C

PVST

04/08/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date