

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 113828

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** TOALE BROTHERS, INC.

**Current Principal Place of Business:**

40 N. ORANGE AVE  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

POSTAL DRAWER T  
SARASOTA, FL 34236

**New Mailing Address:**

POSTAL DRAWER T  
SARASOTA, FL 34230

**FEI Number:** 59-0479420

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOALE, JASON E  
40 N ORANGE AVENUE  
SARASOTA, FL 34236 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:** PD  
**Name:** TOALE, JASON E.  
**Address:** 40 N ORANGE AVE  
**City-St-Zip:** SARASOTA, FL

**Title:** D  
**Name:** TOALE, CURTIS H.  
**Address:** 40 N ORANGE AVE.  
**City-St-Zip:** SARASOTA, FL

**Title:** STD  
**Name:** TOALE, ROBERT V.  
**Address:** 40 N ORANGE AVE  
**City-St-Zip:** SARASOTA, FL

**Title:** D  
**Name:** TOALE, JEFFERY G.  
**Address:** 40 N. ORANGE AVE.  
**City-St-Zip:** SARASOTA, FL

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:** JASON TOALE

PD

02/06/2012

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

\_\_\_\_\_  
Date