

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 223528

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** THULLBERY CARETAKING INC

**Current Principal Place of Business:**

3900 SCENIC HWY S.  
LAKE WALES, FL 338987416 US

**New Principal Place of Business:**

**Current Mailing Address:**

3900 SCENIC HWY S.  
LAKE WALES, FL 338987416 US

**New Mailing Address:**

FEI Number: 59-0848956

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THULLBERY, FRANK M PD  
3900 SCENIC HWY S  
LAKE WALES, FL 338987416 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: THULLBERY, FRANK M PD  
Address: 3900 SCENIC HWY S  
City-St-Zip: LAKE WALES, FL 33898 US

Title: D  
Name: THULLBERY, CATHERINE D SD  
Address: 3900 SCENIC HWY S  
City-St-Zip: LAKE WALES, FL 33898 US

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: FRANK M THULLBERY

PRES

04/04/2011

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

\_\_\_\_\_ Date