## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 530938** 

Entity Name: CARSON SALES, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Outlette interpart face of Basiness.	11CW   IIIIOIPAI   IAOC OI BASIIICSS.

412 E. MADISON STREET, SUITE 915 TAMPA, FL 33623

**Current Mailing Address: New Mailing Address:** 

PO BOX 23402 TAMPA, FL 33623 US

FEI Number: 59-1738878 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WILLIAM OLIVER 2606 MORRISON AVENUE SUITE 225 TAMPA, FL 33629 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCFO () Delete Title: PCFO (X) Change ( ) Addition

Name: GILLHAM, MARK Name: GILLHAM, MARK 1009 PIERCE DR BLDG 3 APT 205 627 6TH AVE. N. Address: Address:

City-St-Zip: CLEARWATER, FL 00000, City-St-Zip: ST. PETERSBURG, FL 33701

Title: VD Title: VD () Delete (X) Change ( ) Addition Name: Name: OLIVER, WILLIAM,

OLIVER, WILLIAM, 4508 AZEELE ST 2606 W. MORRISON AVE. Address: Address: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 00000 City-St-Zip:

Title: Title: ( ) Delete TD (X) Change ( ) Addition

CARSON, JAMES T, CEO CARSON, JAMES T, CEO Name: Name: 4508 AZEELE ST 4508 AZEELE ST Address: Address: City-St-Zip: TAMPA, FL 00000 City-St-Zip: TAMPA, FL 33609

Title: STD () Delete Title: (X) Change ( ) Addition

CARSON, LORRAINE CARSON, LORRAINE Name: Name: Address: 4508 AZEE 1C ST. Address: 4508 AZEELE ST. City-St-Zip: TAMPA, FL 33609 City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES T. CARSON TD 04/27/2005