2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# 530938

Entity Name: CARSON SALES, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

PO BOX 23402
TAMPA, FL 33623 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

WILLIAM OLIVER
2606 MORRISON AVENUE
SUITE 225
TAMPA, FL 33629 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CARSON, CYNTHIA G
Address: 2702 W. PAXTON AVE. APT. E
City-St-Zip: TAMPA, FL 33611

Title: VD ( ) Delete
Name: OLIVER, WILLIAM
Address: 2606 W. MORRISON AVE.
City-St-Zip: TAMPA, FL 33629

Title: TD ( ) Delete
Name: CARSON, JAMES T
Address: 4508 AZEELE ST
City-St-Zip: TAMPA, FL 33609

Title: SD (X) Delete
Name: CARSON, LORRAINE
Address: 4508 AZEELE ST.
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change ( ) Addition
Name: CARSON, JAMES T
Address: 4508 AZEELE ST
City-St-Zip: TAMPA, FL 33609

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 STD 04/23/2007
Electronic Signature of Signing Officer or Director Date