2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 544387 1. Entity Name

FILED
Jan 24, 2004 08:00 AM
Secretary of State

Principal Place of Business

2310 LAKELAND HILLS BLVD. LAKELAND, FL 33805

CARLTON & CARLTON, P.A.

Mailing Address

2310 LAKELAND HILLS BLVD. LAKELAND, FL 33805



DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

01222004	No Chg-P	CR2E034 (10/03)			
4. FEI Number	•	Applied For			
59-1752	2040	Not Applicable			

5. Certificate of Status Desired See Required Fee Required

CARLTON, CHARLES L. 2310 LAKE LAND HILLS BLVD LAKELAND, FL 33805

DO NOT WRITE IN THIS SPACE

The above named only submits this statement for the purpost of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE Should by the property strand name of registered sport and the it applicable. (NOTE: Registered Agent Sporture required when reinstating) DATE						
FILE NOWIN FEE IS \$150.00 9. Election Campaign Fir		Election Campaign Finance Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARLTON, CHARLES L. 2120 LAKELAND HILLS BLVD LAKELAND, FL	CTORS			000000012422 01/26/04-80009-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARLTON, GERALDYNE H. 2120 LAKELAND HILLS BLVD LAKELAND, FL					
NAME STREET ADDRESS CITY-ST-ZIP	RE EET ADDRESS. /-ST-ZIP DO NOT W				NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE HAME STREET ADDRESS CITY-ST-ZIP					e e e e e e e e e e e e e e e e e e e	
TRILE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						