

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 672312

Entity Name: T.L. FISHER, INC.

FILED  
Apr 27, 2011  
Secretary of State

**Current Principal Place of Business:**

2021 SW 27TH AVENUE  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

2021 SW 27TH AVENUE  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 59-2007245

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, THOMAS, L  
5393 SW 85TH STREET  
OCALA, FL 34476 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: PSTD  
Name: FISHER, THOMAS L.  
Address: 5393 SW 85TH STREET  
City-St-Zip: Ocala, FL 34476

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: THOMAS LYNN FISHER

PRES

04/27/2011

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

\_\_\_\_\_ Date