

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000766

FILED  
Jan 19, 2012  
Secretary of State

**Entity Name:** CORLE CUTTING & SEWING CORPORATION

**Current Principal Place of Business:**

TIM R. CORLE  
4615 SNOWY EGRET DRIVE  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

TIM R. CORLE  
4615 SNOWY EGRET DRIVE  
NAPLES, FL 34119

**New Mailing Address:**

**FEI Number:** 62-1480279

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORLE, TIM R  
4616 SNOWY EGRET DRIVE  
NAPLES, FL 34119 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: PT  
Name: CORLE, TIM R  
Address: 4615 SNOWY EGRET DRIVE  
City-St-Zip: NAPLES, FL 34119

Title: VPS  
Name: CORLE, KAREN S  
Address: 4615 SNOWY EGRET DRIVE  
City-St-Zip: NAPLES, FL 34119

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: TIM R. CORLE

PT

01/19/2012

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

\_\_\_\_\_  
Date