

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H78079

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** FRASER AND MOHLKE ASSOCIATES, INC.

**Current Principal Place of Business:**

1400 POMPEI LANE  
UNIT 45  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2312  
NAPLES, FL 34106312 US

**New Mailing Address:**

**FEI Number:** 59-2597471

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MOHLKE, GEORGE C. JR.  
1400 POMPEI LANE-UNIT 45  
NAPLES, FL 34103 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: VSD  
Name: FRASER, ALICE J.  
Address: 1315 SOLANA RD  
City-St-Zip: NAPLES, FL 34103

Title: PTD  
Name: MOHLKE, GEORGE C., JR.  
Address: 1400 POMPEI LANE UNIT 45  
City-St-Zip: NAPLES, FL 34103

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: GEORGE C. MOHLKE, JR.

PRES

04/28/2011

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

\_\_\_\_\_  
Date