

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K08956

FILED  
Mar 26, 2012  
Secretary of State

**Entity Name:** CAROUSEL OF ROCKLEDGE, INC.

**Current Principal Place of Business:**

1355 SO US 1  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

1355 SO US 1  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

**FEI Number:** 59-2871682

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOSTER, MARILYN  
8934 PUERTO DEL RIO DRIVE  
#402  
CAPE CANAVERAL, FL 32920 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:** DV  
**Name:** FOSTER, MARILYN  
**Address:** 8934 PUERTO DEL RIO DRIVE #402  
**City-St-Zip:** CAPE CANAVERAL, FL 32920

**Title:** ST  
**Name:** BRAXTON, JOHN  
**Address:** 1803 OAK DRIVE NORTH  
**City-St-Zip:** ROCKLEDGE, FL 32955

**Title:** PD  
**Name:** BRAXTON, JOHN  
**Address:** 1803 OAK DR. N.  
**City-St-Zip:** ROCKLEDGE, FL 32955

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:** MARILYN FOSTER

DV

03/26/2012

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

\_\_\_\_\_  
Date