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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Northern Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K59463 (5) 1. Corporation Name CAROL ANNE POEHLMAN, INC.			
Principal Place of Business 3538 GLOSSY IBIS COURT PALM HARBOR FL 34683		Mailing Address 3538 GLOSSY IBIS COURT PALM HARBOR FL 34683	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 County		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 County	
9. Name and Address of Current Registered Agent DURYEA, DAN K. 38402 U.S. HWY 19 N. PALM HARBOR FL 34684		10. Name and Address of Now Registered Agent 81 Name JAMES H. POEHLMAN 82 Street Address (P.O. Box Number is Not Acceptable) 3538 Glossy Ibis Ct. 83 City, State & Zip Palm Harbor FL 34683 84 County	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept my obligation of, Section 607.0505, Florida Statutes. SIGNATURE <i>James Herbert Poehlman</i> James Herbert Poehlman, s/r/o 4/28/95 (Signature of Registered Agent or Registered Agent and Secretary of State) (Signature of Registered Agent or Registered Agent and Secretary of State)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
101 NAME STD 102 NAME POEHLMAN, JAMES HERBERT 103 STREET ADDRESS 3538 GLOSSY IBIS CT. 104 CITY, ST, ZIP PALM HARBOR FL	111 NAME ☐ Change ☐ Addition 112 NAME 113 STREET ADDRESS 114 CITY, ST, ZIP	111 NAME ☐ Change ☐ Addition 112 NAME 113 STREET ADDRESS 114 CITY, ST, ZIP	
101 NAME PD 102 NAME POEHLMAN, CAROL ANNE 103 STREET ADDRESS 3538 GLOSSY IBIS CT. 104 CITY, ST, ZIP PALM HARBOR FL	121 NAME ☐ Change ☐ Addition 122 NAME 123 STREET ADDRESS 124 CITY, ST, ZIP	121 NAME ☐ Change ☐ Addition 122 NAME 123 STREET ADDRESS 124 CITY, ST, ZIP	
101 NAME VD 102 NAME POEHLMAN, JAMES HUBERT 103 STREET ADDRESS 3538 GLOSSY IBIS CT. 104 CITY, ST, ZIP PALM HARBOR FL	131 NAME ☐ Change ☐ Addition 132 NAME 133 STREET ADDRESS 134 CITY, ST, ZIP	131 NAME ☐ Change ☐ Addition 132 NAME 133 STREET ADDRESS 134 CITY, ST, ZIP	
101 NAME 102 NAME 103 STREET ADDRESS 104 CITY, ST, ZIP	141 NAME ☐ Change ☐ Addition 142 NAME 143 STREET ADDRESS 144 CITY, ST, ZIP	141 NAME ☐ Change ☐ Addition 142 NAME 143 STREET ADDRESS 144 CITY, ST, ZIP	
101 NAME 102 NAME 103 STREET ADDRESS 104 CITY, ST, ZIP	151 NAME ☐ Change ☐ Addition 152 NAME 153 STREET ADDRESS 154 CITY, ST, ZIP	151 NAME ☐ Change ☐ Addition 152 NAME 153 STREET ADDRESS 154 CITY, ST, ZIP	
101 NAME 102 NAME 103 STREET ADDRESS 104 CITY, ST, ZIP	161 NAME ☐ Change ☐ Addition 162 NAME 163 STREET ADDRESS 164 CITY, ST, ZIP	161 NAME ☐ Change ☐ Addition 162 NAME 163 STREET ADDRESS 164 CITY, ST, ZIP	
14. I, the undersigned, certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19(2)(b)(i) Florida Statutes. I further certify that the information included on this filing 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 127, Florida Statutes, and that my name appears in Block 12 of this filing.			
SIGNATURE: <i>James H. Poehlman</i> JAMES H. POEHLMAN 4/28/95 (813) 789-1494 (Signature of Registered Agent or Registered Agent and Secretary of State) (Signature of Registered Agent or Registered Agent and Secretary of State)		STD	