

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011483

FILED  
Mar 05, 2012  
Secretary of State

**Entity Name:** CARLTON FIELDS CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

4221 W. BOY SCOUT BLVD.,SUITE 1000  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

4221 W. BOY SCOUT BLVD.,SUITE 1000  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 27-1411412

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CFRA, LLC  
100 S. ASHLEY DR.  
SUITE 400  
TAMPA, FL 33602 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:** D  
**Name:** SASSO, GARY L  
**Address:** 4221 W. BOY SCOUT BLVD.,SUITE 1000  
**City-St-Zip:** TAMPA, FL 33607

**Title:** D  
**Name:** BRODIE, STEVEN J  
**Address:** 100 S.E. SECOND STREET, SUITE 4200  
**City-St-Zip:** MIAMI, FL 33131

**Title:** D  
**Name:** PRATS, LUIS  
**Address:** 4221 W. BOY SCOUT BLVD.,SUITE 1000  
**City-St-Zip:** TAMPA, FL 33607

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GARY L. SASSO

D

03/05/2012

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

\_\_\_\_\_  
Date