

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000070968

Entity Name: LISA CARLSON, INC.

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

33339 TERRAGONA DRIVE  
SORRENTO, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

33339 TERRAGONA DRIVE  
SORRENTO, FL 32776

**New Mailing Address:**

FEI Number: 59-3660521

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARLSON, LISA  
33339 TERRAGONA DRIVE  
SORRENTO, FL 32776 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: PD  
Name: CARLSON, LISA  
Address: 33339 TERRAGONA DRIVE  
City-St-Zip: SORRENTO, FL 32776

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: LISA CARLSON

PRES

02/15/2011

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

\_\_\_\_\_  
Date