

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000005417

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** SPECIALTY FENCE WHOLESale, INC.

**Current Principal Place of Business:**

180 KID ELLIS ROAD  
MULBERRY, FL 33860

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 588  
MULBERRY, FL 33860

**New Mailing Address:**

180 KID ELLIS ROAD  
MULBERRY, FL 33860

**FEI Number:** 59-3691709

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBINSON, DEBRA E  
4453 FAIRWAY OAKS DR  
MULBERRY, FL 33860 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: ROBINSON, ALAN  
Address: 4453 FAIRWAY OAKS DR  
City-St-Zip: MULBERRY, FL 33860

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: ALAN ROBINSON

D

04/12/2012

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

\_\_\_\_\_  
Date