

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034012

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** DWAIN E. CARRIER ENTERPRISES, INC.

**Current Principal Place of Business:**

14144 SE 63TERR  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

4701 NE 8TH CT.  
OCALA, FL 34479

**Current Mailing Address:**

14144 SE 63TERR  
SUMMERFIELD, FL 34491

**New Mailing Address:**

4701 NE 8TH CT.  
OCALA, FL 34479

**FEI Number:** 59-3719295

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARRIER, DWAIN E  
14144 SE 63TERR  
SUMMERFIELD, FL 34491 US

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

CARRIER, DWAIN E  
4701 NE 8TH CT.  
OCALA, FL 34479 US

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:

02/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: CARRIER, DWAIN E  
Address: 4701 NE 8TH CT.  
City-St-Zip: OCALA, FL 34479

Title: VPD  
Name: CARRIER, LARENA D  
Address: 4701 NE 8TH CT.  
City-St-Zip: OCALA, FL 34479

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: DWAIN E. CARRIER

PSTD

02/17/2012

Electronic Signature of Signing Officer or Director

Date