2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Sep 08, 2003 8:00 am Secretary of State P02000106190 DOCUMENT # 09-08-2003 90143 038 ***150.00 1. Entity Name CARLETON ENTERPRISES, INC. Principal Place of Business Mailing Address 1790 18TH AVENUE N.E. 1790 18TH AVENUE N.E. NAPLES FL 34120 NAPLES FL 34120 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For <u>51-0429537</u> Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7." Name and Address of New Registered Agent Name CARLETON, RICHARD Street Address (P.O. Box Number is Not Acceptable) 1790 18TH AVENUE N.E. NAPLES FL 34120 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 9 ... SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE_IS \$550.00 9. Election Campaign Financing **\$5.00** May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. \Box Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Addition CARLETON, RICHARD NAME NAME 1790 18TH AVENUE N.E. STREET ADDRESS STREET ADDRESS CITY-ST-7IP NAPLES FL 34120 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-SY-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

STREET ADDRESS

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TITLE

NAME

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SIGNATURE:

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TITLE

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REQUIRED RICHARD A. CARLETON ME OF SIGNING OFFICER OR DIRECTOR PRESIDENT

Delete

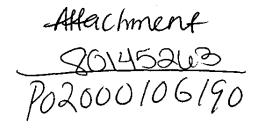
☐ Delete

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Addition



Carleton Enterprises, Inc. 1790 18th Ave NE Naples Fl 34120

August 29, 2003

To Whom It May Concern:

This is to inform you that Carleton Enterprises Inc. did not receive a prior notice of this fee. Therefore we are inclosing the original sum of \$150.00 to pay our filing fees.

Thank you,

Richard A. Carleton

PRESIDENT