

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90143 038 \*\*\*150.00

0107851 AN

**DOCUMENT # P02000106190**

1. Entity Name  
**CARLETON ENTERPRISES, INC.**



Principal Place of Business  
**1790 18TH AVENUE N.E.  
NAPLES FL 34120**

Mailing Address  
**1790 18TH AVENUE N.E.  
NAPLES FL 34120**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

CHECK HERE IF MAKING CHANGES

4. FEI Number

**51-0429537**

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARLETON, RICHARD  
1790 18TH AVENUE N.E.  
NAPLES FL 34120**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	<b>D CARLETON, RICHARD 1790 18TH AVENUE N.E. NAPLES FL 34120</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: *Richard A. Carleton* SIGNATURE REQUIRED RICHARD A. CARLETON 8-29-03 239-354-0482**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **PRESIDENT** Date Daytime Phone #

CR2E034 (4/03)

Attachment  
20145263  
PO2000106190

Carleton Enterprises, Inc.  
1790 18<sup>th</sup> 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