

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000001114

1. Entity Name
W. JACK CARTER, INC.



Principal Place of Business
702 N. TRAILWOOD DRIVE
APOPKA, FL 32712

Mailing Address
702 N. TRAILWOOD DRIVE
APOPKA, FL 32712



01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
83-0347121

Applied For
Not Applicable

5. Certificate of Status Desired. ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CARTER, WALTER JACKSON
702 N. TRAILWOOD DRIVE
APOPKA, FL 32712

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000580001
01/10/07-80029-015 158.75

10. OFFICERS AND DIRECTORS

TITLE	D/P
NAME	CARTER, WALTER JACKSON P
STREET ADDRESS	702 N. TRAILWOOD DRIVE
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	VP
NAME	CARTER, SHIRLEY A VP
STREET ADDRESS	702 N. TRAILWOOD DRIVE
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: WALTER JACKSON CARTER Walter Jackson Carter 1/4/2007 407-886-3677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #