

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000063097

**FILED**  
**May 10, 2011**  
**Secretary of State**

**Entity Name:** KARLENE'S TENDER LOVE AND CARE, INC.

**Current Principal Place of Business:**

2351 NW 54TH PL.  
GAINESVILLE, FL 32653

**New Principal Place of Business:**

**Current Mailing Address:**

2705 SW 125TH STREET  
ARCHER, FL 32618

**New Mailing Address:**

**FEI Number:** 06-1697025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SCOTT, CAROLYN Y  
2705 SW 125TH STREET  
ARCHER, FL 32618 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: PRES  
Name: SCOTT, LONNIE  
Address: 2705 SW 125TH STREET  
City-St-Zip: ARCHER, FL 32618

Title: VP  
Name: SCOTT, CAROLYN Y  
Address: 2705 SW 125TH ST  
City-St-Zip: ARCHER, FL 32618

Title: SECR  
Name: SCOTT, KARLENE L  
Address: 2705 SW 125TH STREET  
City-St-Zip: ARCHER, FL 32618

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: LONNIE SCOTT

PRES

05/10/2011

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

\_\_\_\_\_  
Date