## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000122837

Entity Name: CARRS - THE TRADITIONAL BARBER, INC.

FILED Feb 12, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4700 MILLENNIA BLVD. 1120 TOWN PARK AVENUE ORLANDO, FL 32839 US

SUITE 1072

LAKE MARY, FL 32746

**Current Mailing Address: New Mailing Address:** 

1120 TOWN PARK AVENUE 4700 MILLENNIA BLVD. ORLANDO, FL 32839 US

**SUITE 1072** 

LAKE MARY, FL 32746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 42-1613939 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KALIVRETENOS, GEORGE DEAN MEAD SERVICES, LLC 4700 MILLENNIA BLVD. 800 N. MAGNOLIA AVENUE SUITE 1500 ORLANDO, FL 32839

ORLANDO, FL 32803 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: ALAN H. DANIELS, VICE PRESIDENT 02/12/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete Title: (X) Change ( ) Addition

KALIVRETENOS, GEORGE FITTON, STUART Name: Name:

4700 MILLENNIA BLVD. 1120 TOWN PARK AVENUE, SUITE 1072 Address: Address:

City-St-Zip: ORLANDO, FL 32839 US City-St-Zip: LAKE MARY, FL 32746 US

Title: () Delete Title: DV ( ) Change (X) Addition

Name: Name: NORRIS, PAUL

Address: Address: 1120 TOWN PARK AVENUE, SUITE 1072

LAKE MARY, FL 32846 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Ρ SIGNATURE: STUART FITTON 02/12/2008