

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000082063

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** TAYLOR INTERNATIONAL (CAPE CORAL) INC

**Current Principal Place of Business:**

3419 NW 21ST TERR  
CAPE CORAL, FL 33993 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN M. WICKER, P.A.  
P.O. DRAWER 60205  
FORT MYERS, FL 33906 US

**New Mailing Address:**

**FEI Number:** 54-2161478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WICKER, JOHN M  
12670 NEW BRITTANY BOULEVARD  
SUITE 101  
FORT MYERS, FL 33907 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: DPT  
Name: TAYLOR, TRACEY-ANN  
Address: 3419 NW 21ST TERR  
City-St-Zip: CAPE CORAL, FL 33993 US

Title: DVPS  
Name: TAYLOR, VAUGHAN M  
Address: 3419 NW 21ST TERR  
City-St-Zip: CAPE CORAL, FL 33993 US

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: TRACEY-ANN TAYLOR

DPT

04/28/2011

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

\_\_\_\_\_  
Date