

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000096277

Entity Name: TWELVE TRIBES, INC

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1330 W LAKE PARKER DR  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

1330 W LAKE PARKER DR  
LAKELAND, FL 33805

**New Mailing Address:**

FEI Number: 90-0184933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAMBERT, VELMA  
1330 W LAKE PARKER DR  
LAKELAND, FL 33805 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: D  
Name: LAMBERT, VELMA M  
Address: 1330 W LAKE PARKER DR  
City-St-Zip: LAKELAND, FL 33805

Title: D  
Name: LAMBERT, ALFAGANIE  
Address: 1330 W LAKE PARKER DR  
City-St-Zip: LAKELAND, FL 33805

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: VELMA LAMBERT

PRES

04/24/2012

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

\_\_\_\_\_  
Date