

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164348

Entity Name: CARLISLE CONSULTANTS INC.

FILED
Aug 23, 2006
Secretary of State

Current Principal Place of Business:

408 ED CARTER STREET
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

P O BOX 7166
WINTER HAVEN, FL 338837166 US

New Mailing Address:

408 ED CARTER STREET
AVON PARK, FL 33825 US

FEI Number: 20-1970654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL TAX CONSULTANTS INC
112 AVENUE E SW
WINTER HAVEN, FL 338803402 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARTER, ANN R
Address: 408 ED CARTER STREET
City-St-Zip: AVON PARK, FL 33825

Title: S () Delete
Name: NELSON, KARIN G
Address: 112 AVENUE E SW
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: CARTER, EDWARD
Address: 408 ED CARTER STREET
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: KARIN G NELSON

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08/23/2006

Electronic Signature of Signing Officer or Director

Date