

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000017152

Entity Name: CRIMINAL INSIGHT CORP.

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4804 E 99TH AVE.  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

4804 E 99TH AVE.  
TAMPA, FL 33617

**New Mailing Address:**

FEI Number: 20-2310559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLOYD, STEVEN  
4804 E 99TH AVE.  
TAMPA, FL 33617 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: FLOYD, STEVEN C  
Address: 4804 E 99TH AVE.  
City-St-Zip: TAMPA, FL 33617

Title: P  
Name: FLOYD, STEVEN C  
Address: 4804 E 99TH AVE  
City-St-Zip: TAMPA, FL 33617 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: STEVEN FLOYD

P

04/18/2011

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

\_\_\_\_\_  
Date