

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000049689

**Entity Name:** LARRY CARVER, INC.

**FILED**  
**Jun 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

400 HAWK DRIVE  
BAREFOOT BAY, FL 32976

**New Principal Place of Business:**

**Current Mailing Address:**

400 HAWK DRIVE  
BAREFOOT BAY, FL 32976

**New Mailing Address:**

**FEI Number:** 20-1794725

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARVER, LARRY  
400 HAWK DRIVE  
BAREFOOT BAY, FL 32976 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: DPST  
Name: CARVER, LARRY  
Address: 400 HAWK DRIVE  
City-St-Zip: BAREFOOT BAY, FL 32976

Title: D  
Name: LAZAR, KIM  
Address: 400 HAWK DRIVE  
City-St-Zip: BAREFOOT BAY, FL 32976

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: LARRY CARVER

DPST

06/25/2011

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

\_\_\_\_\_  
Date