

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000137985

Entity Name: CARPE DM, INC.

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5728 JONES CREEK RD  
KEYSTONE HEIGHTS, FL 326567227 US

**New Principal Place of Business:**

**Current Mailing Address:**

5728 JONES CREEK RD  
KEYSTONE HEIGHTS, FL 326567227 US

**New Mailing Address:**

FEI Number: 20-3585509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SACKETT, LEE A  
5728 JONES CREEK RD  
KEYSTONE HEIGHTS, FL 326567227 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: P  
Name: SACKETT, LEE A  
Address: 5728 JONES CREEK RD  
City-St-Zip: KEYSTONE HEIGHTS, FL 326567227 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: LEE SACKETT

P

02/17/2011

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

\_\_\_\_\_  
Date