

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05161

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** WORRELL ENTERPRISES, INC.

**Current Principal Place of Business:**

1180 SEMINOLE TRAIL  
SUITE 155  
CHARLOTTESVILLE, VA 22901

**New Principal Place of Business:**

**Current Mailing Address:**

1180 SEMINOLE TRAIL  
SUITE 155  
CHARLOTTESVILLE, VA 22901

**New Mailing Address:**

**FEI Number:** 62-1236304

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORICK, SANDI  
615 SOUTH L STREET  
LAKE WORTH, FL 33460 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: PD  
Name: GOODYEAR, KIMBERLY A  
Address: 1180 SEMINOLE TR, STE 155  
City-St-Zip: CHARLOTTESVILLE, VA 22901

Title: CD  
Name: WORRELL, THOMAS E. JR.  
Address: 1005 LAKE AVENUE, STE301  
City-St-Zip: LAKE WORTH, FL 33460

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: KIM GOODYEAR

PD

01/18/2012

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

\_\_\_\_\_  
Date