


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 8:00 am
Secretary of State

02-26-2008 90010 031 ***150.00

DOCUMENT # P06000029603 1. Entity Name INCENTIVE PLANNING CORP.	
--	---

Principal Place of Business 101 SOUTH NINTH AVENUE WAUCHULA, FL 33873 US	Mailing Address 101 SOUTH NINTH AVENUE WAUCHULA, FL 33873 US
--	--

66004758



01102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4398081	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CARLTON, JOE 101 SOUTH NINTH AVENUE WAUCHULA, FL 33873

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT CARLTON, JOE L 101 S NINTH ST WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TURNER, PAUL M 10000 E PRINCE RD TUCSON, AZ 85749
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARLTON, CORI L 106 25TH ST NW BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARLTON, MARIA 6404 MANATEE AVE W SUITE J BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joe L Carlton CARLTON

863-773-4800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #