

2008 FOR PROFIT CORPORATION ANNUAL REPORT

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

02-26-2008 90008 026 ***150.00

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1. Entity Name
INCENTIVE PLANNING AND DESIGN CORP.



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

Mailing Address
101 SOUTH NINTH AVENUE
WAUCHULA, FL 33873 US

66004756



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-4398179

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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

Signature, typed or printed name of registered agent and see if applicable.

(NOTE: Registered Agent signature required when reappointing)

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	PDAT
NAME	CARLTON, JOE L
STREET ADDRESS	101 S. NINTH ST
CITY - ST - ZIP	WAUCHULA, FL 33873
TITLE	TD
NAME	SHEARER, LAURA A
STREET ADDRESS	5205 26TH ST W SUITE B
CITY - ST - ZIP	BRADENTON, FL 34207
TITLE	SD
NAME	CARLTON, L. CORI
STREET ADDRESS	108 25TH ST NW
CITY - ST - ZIP	BRADENTON, FL 34205
TITLE	ASD
NAME	CARLTON, MARIA A
STREET ADDRESS	6402 MANATEE AVE W SUITE J
CITY - ST - ZIP	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* JOE L CARLTON

863-773-4800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #