

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000052227

Entity Name: FOAL ENTERPRISES INC

**FILED**  
**Feb 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

291 OLD COUNTRY ROAD  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

291 OLD COUNTRY ROAD  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 20-8960307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NISBET, ELIZABETH  
12860 MEADOWBREEZE DRIVE  
WELLINGTON, FL 33414 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: COLUCCIO, ROBERT  
Address: 291 OLD COUNTRY ROAD  
City-St-Zip: WELLINGTON, FL 33414 US

Title: VP  
Name: COLUCCIO, EVAN  
Address: 291 OLD COUNTRY ROAD  
City-St-Zip: WELLINGTON, FL 33414 US

Title: T  
Name: NISBET, ELIZABETH  
Address: 12860 MEADOWBREEZE DRIVE  
City-St-Zip: WELLINGTON, FL 33414 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: ELIZABETH NISBET

T

02/06/2012

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

\_\_\_\_\_  
Date