

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000064877

**FILED**  
**Mar 26, 2011**  
**Secretary of State**

**Entity Name:** MIKE MORSE INVESTIGATIONS, INC.

**Current Principal Place of Business:**

4415 FLORIDA NATIONAL DRIVE  
SUITE 206  
LAKELAND, FL 33813

**New Principal Place of Business:**

3702 HILEMAN DRIVE NORTH  
LAKELAND, FL 33810 US

**Current Mailing Address:**

PO BOX 781  
KATHLEEN, FL 33849

**New Mailing Address:**

PO BOX 781  
KATHLEEN, FL 33849 US

**FEI Number:** 26-3199565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORSE, MICHAEL R  
4879 WILLIAMSTOWN BLVD  
LAKELAND, FL 33810 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: MORSE, MICHAEL  
Address: 4879 WILLIAMSTOWN BLVD  
City-St-Zip: LAKELAND, FL 33810 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: MICHAEL R MORSE

MR

03/26/2011

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

\_\_\_\_\_  
Date