

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000017372

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** CARTER'S FRIED CHICKEN OF LAKE BUTLER, INC.

**Current Principal Place of Business:**

9292 SW 57TH TRAIL  
LAKE BUTLER, FL 32054 US

**New Principal Place of Business:**

225 WEST MAIN STREET  
LAKE BUTLER, FL 32054 US

**Current Mailing Address:**

9292 SW 57TH TRAIL  
LAKE BUTLER, FL 32054 US

**New Mailing Address:**

225 WEST MAIN STREET  
LAKE BUTLER, FL 32054 US

**FEI Number:** 27-2081980

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLLOWAY, MELISSA W  
9292 SW 57TH TRAIL  
LAKE BUTLER, FL 32054 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: HOLLOWAY, MELISSA W  
Address: 9292 SW 57TH TRAIL  
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: T  
Name: HOLLOWAY, MELISSA W  
Address: 9292 SW 57TH TRAIL  
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: S  
Name: HOLLOWAY, MELISSA W  
Address: 9292 SW 57TH TRAIL  
City-St-Zip: LAKE BUTLER, FL 32054

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: MELISSA HOLLOWAY

P

04/20/2011

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

\_\_\_\_\_  
Date