

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000041400

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** CONSOLIDATED NATIONAL CORPORATION

**Current Principal Place of Business:**

901 VENETIA BAY BLVD  
SUITE 354  
VENICE, FL 34285 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 VENETIA BAY BLVD  
SUITE 354  
VENICE, FL 34285 US

**New Mailing Address:**

**FEI Number:** 61-1067126

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DP  
Name: SHAW, ROBERT T  
Address: 731 GOLFERS RETREAT  
City-St-Zip: VENICE, FL 34293

Title: DVS  
Name: RICE, C. FRED  
Address: 28921 CAVELL TERR  
City-St-Zip: NAPLES, FL 34119

Title: AS  
Name: GLIESSNER, PATRICIA W  
Address: 504 CLUBSIDE CIR  
City-St-Zip: VENICE, FL 34293

Title: T/AS  
Name: RICE, JERRY W  
Address: 4211 NORBOURNE BLVD  
City-St-Zip: LOUISVILLE, KY 40207

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: ROBERT T. SHAW

P

03/16/2011

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

\_\_\_\_\_  
Date