

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000030724

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** CARSON, CARSON & ASSOCIATES, P.A.

**Current Principal Place of Business:**

1815 MICCOSUKEE COMMONS DRIVE  
STE 106  
TALLAHASSEE, FL 323085433 US

**New Principal Place of Business:**

**Current Mailing Address:**

1815 MICCOSUKEE COMMONS DRIVE  
STE 106  
TALLAHASSEE, FL 323085433 US

**New Mailing Address:**

**FEI Number:** 59-3314222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARSON, BRENDA M  
1815 MICCOSUKEE COMMONS DRIVE  
STE 106  
TALLAHASSEE, FL 32308 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:** PD  
**Name:** CARSON, R S  
**Address:** 1815 MICCOSUKEE COMMONS DR STE 106  
**City-St-Zip:** TALLAHASSEE, FL 323085433

**Title:** VSTD  
**Name:** CARSON, BRENDA M  
**Address:** 1815 MICCOSUKEE COMMONS DR, STE 106  
**City-St-Zip:** TALLAHASSEE, FL 323085433

**Title:** VPD  
**Name:** CARSON, HARRY B  
**Address:** 1815 MICCOSUKEE COMMONS DR. STE 106  
**City-St-Zip:** TALLAHASSEE, FL 323085433

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:** BRENDA M. CARSON

PVST

04/21/2011

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

\_\_\_\_\_  
Date