

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000051647

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** ALLBRITTON ENTERPRISES INC.

**Current Principal Place of Business:**

6481 SW OWENS SCHOOL ST  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

6481 SW OWENS SCHOOL ST  
ARCADIA, FL 34266

**New Mailing Address:**

**FEI Number:** 65-0597167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLBRITTON, MICHAEL A PRESIDE  
1760 S.E. PEACH DRIVE  
ARCADIA, FL 34266 US

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

ALLBRITTON, MICHAEL A PRESIDE  
6481 SW OWENS SCHOOL ST  
ARCADIA, FL 34266 US

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:** MICHAEL ALLBRITTON

01/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ALLBRITTON, MICHAEL A  
**Address:** 6481 SW OWENS SCHOOL ST  
**City-St-Zip:** ARCADIA, FL 34266

**Title:** S  
**Name:** ALLBRITTON, MICHELLE L  
**Address:** 6481 SW OWENS SCHOOL ST  
**City-St-Zip:** ARCADIA, FL 34266

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:** MICHELLE ALLBRITTON

S

01/09/2012

Electronic Signature of Signing Officer or Director

Date