

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000063668

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** BARFIELD AND ASSOCIATES ORGANIZATIONAL COMMUNICATIONS CONSULTANTS, INC.

**Current Principal Place of Business:**

13914 SMOKERISE CT  
ORLANDO, FL 32832

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 720776  
ORLANDO, FL 328720776

**New Mailing Address:**

**FEI Number:** 59-3415900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARFIELD, RUFUS LENRO II  
13914 SMOKERISE CT.  
ORLANDO, FL 32832 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: CEO  
Name: CANTY-BARFIELD, VALARIE D  
Address: 13914 SMOKERISE CT.  
City-St-Zip: ORLANDO, FL 32832

Title: PRES  
Name: BARFIELD, RUFUS L II PHD.  
Address: 13914 SMOKERISE CT.  
City-St-Zip: ORLANDO, FL 32832

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: VALARIE BARFIELD

CEO

04/28/2011

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

\_\_\_\_\_  
Date