

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000015249

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

**Entity Name:** CANDY'S CLASSIC TOUCHOF KATHLEEN, INC.

**Current Principal Place of Business:**

2969 DUFF RD  
LAKELAND, FL 33810

**New Principal Place of Business:**

**Current Mailing Address:**

2969 DUFF RD  
LAKELAND, FL 33810

**New Mailing Address:**

**FEI Number:** 59-3436395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VANN, CANDY K  
4312 GENVIEW DRIVE  
LAKELAND, FL 33810 US

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

VANN, CANDY K  
4312 GLENVIEW DRIVE  
LAKELAND, FL 33810 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

01/28/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: VANN, CANDY K  
Address: 4312 GLENVIEW DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: VTD  
Name: VANN, THIMAS E III  
Address: 4312 GLENVIEW DRIVE  
City-St-Zip: LAKELAND, FL 33810

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: CANDY K VANN

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

PSD

01/28/2011

\_\_\_\_\_  
Date