

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000034454

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

**Entity Name:** LONEWOLF CONSULTING & DEVELOPMENT, INC.

**Current Principal Place of Business:**

6020 WILLIAMS ROAD  
SEFFNER, FL 33584 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7220  
SEFFNER, FL 33584 US

**New Mailing Address:**

**FEI Number:** 59-3516772

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARROLL, MAC  
6020 WILLIAMS ROAD  
SEFFNER, FL 33584 US

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

DRUMMOND, TEMPLE H ESQ  
6987 E FOWLER AVENUE  
TAMPA, FL 33617 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:** TEMPLE H. DRUMMOND

04/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PTS  
**Name:** CARROLL, MAC  
**Address:** 6020 WILLIAMS ROAD  
**City-St-Zip:** SEFFNER, FL 33584

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:** MAC CARROLL

P

04/09/2012

Electronic Signature of Signing Officer or Director

Date