

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S59781

Entity Name: CANOE ESCAPE, INC.

**FILED**  
**Jun 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9335 FOWLER AVE E  
THONOTOSASSA, FL 33592

**New Principal Place of Business:**

JOHN B. SARGEANT PARK  
12702 US 301  
THONOTOSASSA, FL 33592

**Current Mailing Address:**

9335 FOWLER AVE E  
THONOTOSASSA, FL 33592

**New Mailing Address:**

FEI Number: 59-3074228

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FAULK, JOSEPH E.  
9335 FOWLER AVE E  
THONOTOSASSA, FL 33592 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: P  
Name: FAULK, JOSEPH E  
Address: 9335 FOWLER AVE E  
City-St-Zip: THONOTOSASSA, FL

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: JOSEPH E FAULK

P

06/11/2012

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

\_\_\_\_\_  
Date