FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY -1 AM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S60296** **(8)**

1. Corporate Name
JANET CARLSON, L.C.S.W., INC.

Principal Place of Business
73 S. PALM AVE.
APT 215
SARASOTA FL 34236

Mailing Address
73 S PALM AVE.
APT 215
SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/18/1991**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 — County — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 — County — 30

4. FEI Number: **59-3073216** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. Is this corporation a small business, as defined by section 288.703, Florida Statutes? ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CARLSON, JANET
7061 S. TAMIAMI TRAIL
SUITE 215
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.1508 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505 Florida Statutes.

SIGNATURE: Janet Carlson — 3/10/95
(Typed or printed name of person signing) (Title of person signing) (Date)

12. OFFICER AND/OR DIRECTOR		13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS IN 1995
Title	PD	☐ Change ☐ Addition
Name	CARLSON, JANET	
Street Address	73 S PALM AVE STE 215	
City-State-Zip	SARASOTA FL	
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 with an address, with an asterisk, or otherwise indicated.

SIGNATURE: Janet Carlson — 4-10-95 — 305 467 7(813)
JANET CARLSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0342521 CP