#### **2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G93314

Entity Name: T.R. OLIVE, INC.

Apr 19, 2013 Secretary of State CC8057116762

**FILED** 

# **Current Principal Place of Business:**

464 S. DUVAL ST. MADISON. FL 32340

## **Current Mailing Address:**

464 S. DUVAL ST. MADISON, FL 32340

FEI Number: 59-2390860 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

OLIVE, BETTY 464 S. DUVAL AVE MADISON, FL 32340 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

Date

#### Officer/Director Detail:

Title P Title VP

NameOLIVE, TERRYNameOLIVE, LARRYAddress464 S. DUVAL AVECity-State-Zip:MADISON FL 32340City-State-Zip:MADISON FL 32340

Title ST

Name OLIVE, DIANNE
Address 464 S. DUVAL ST.
City-State-Zip: MADISON FL 32340

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: DIANNE OLIVE

Electronic Signature of Signing Officer/Director Detail

**SECRETARY** 

04/19/2013