

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000090533

FILED
Mar 08, 2011
Secretary of State

Entity Name: INCEPTURE, INC.

Current Principal Place of Business:

8381 DIX ELLIS TRAIL
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8381 DIX ELLIS TRAIL
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3720231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATEH, SUSAN J
4800 DEERWOOD CAMPUS PKWY, 100-7
JACKSONVILLE, FL 32246 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: C
Name: BOOMA, STEPHEN R
Address: 4800 DEERWOOD CAMPUS PKWY, DC1-8
City-St-Zip: JACKSONVILLE, FL 32246

Title: D
Name: O'REILLY, BARRY
Address: 4800 DEERWOOD CAMPUS PKWY, DC6-6
City-St-Zip: JACKSONVILLE, FL 32246

Title: D
Name: SMITH, DARNELL
Address: 4800 DEERWOOD CAMPUS PKWY, DC1-8
City-St-Zip: JACKSONVILLE, FL 32246

Title: PD
Name: ERNIE, FRANKLIN
Address: 8381 DIX ELLIS TRAIL
City-St-Zip: JACKSONVILLE, FL 32256

Title: T
Name: TUCKER, SONDR
Address: 4800 DEERWOOD CAMPUS PKWY, DC1-5
City-St-Zip: JACKSONVILLE, FL 32246

Title: S
Name: BATEH, SUSAN J
Address: 4800 DEERWOOD CAMPUS PKWY, DC1-7
City-St-Zip: JACKSONVILLE, FL 32246

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: SUSAN J. BATEH

S

03/08/2011

Electronic Signature of Signing Officer or Director

_____ Date