

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000046361

FILED
Feb 18, 2011
Secretary of State

Entity Name: ROBERT WILLIAMS TRUE SHINE INC.

Current Principal Place of Business:

1505 N 42ND ST.
FORT PIERCE, FL 34947

New Principal Place of Business:

178 CAROL SUSAN LANE
FORT PIERCE, FL 34982

Current Mailing Address:

1505 N 42ND ST.
FORT PIERCE, FL 34947

New Mailing Address:

P.O. BOX 217
FORT PIERCE, FL 34954

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT
1505 N 42ND ST.
FORT PIERCE, FL 34947 US

Name and Address of New Registered Agent:

WILLIAMS, ROBERT
178 CAROL SUSAN LANE
FORT PIERCE, FL 34982 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

02/18/2011

Date

OFFICERS AND DIRECTORS:

Title: O
Name: WILLIAMS, ROBERT
Address: 178 CAROL SUSAN LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: O
Name: WILLIAMS, DIANE
Address: 1505 N 42ND ST.
City-St-Zip: FORT PIERCE, FL 34947

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: ROBERT WILLIAMS

O

02/18/2011

Electronic Signature of Signing Officer or Director

Date