

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000046704

**Entity Name:** YOST, INC.

**Current Principal Place of Business:**

645 NE 2ND AVE  
CRYSTAL RIVER, FL 34428

**Current Mailing Address:**

PO BOX 925  
CRYSTAL RIVER, FL 34423

**FEI Number:** 59-3666374

**Certificate of Status Desired:** No

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

GARRICK, DAVID M  
420 MILLER CREEK  
CRYSTAL RIVER, FL 34428 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            PRES  
Name            GARRICK, DAVID M  
Address        P.O. BOX 420  
City-State-Zip: CRYSTAL RIVER FL 34423

Title            OD  
Name            GARRICK, SUSAN E  
Address        P O BOX 420  
City-State-Zip: CRYSTAL RIVER FL 34423

*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:** DAVID GARRICK

**PRESIDENT**

**03/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date