

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 002900

FILED
Jan 03, 2012
Secretary of State

Entity Name: ROBINSON IMPROVEMENT COMPANY

Current Principal Place of Business:

% GARRETT, WOOD & CO., PA
4417 BEACH BLVD STE 200
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

% GARRETT, WOOD & CO., PA
4417 BEACH BLVD STE 200
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-0579914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRETT, MICHAEL W
GARRETT, WOOD & CPA, PA
4417 BEACH BLVD, STE 200
JACKSONVILLE, FL 32207 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: D
Name: FURNIVAL, BERNARD H
Address: 525 WEST 238TH STREET, APT 3N
City-St-Zip: BRONX, NY 10463

Title: TD
Name: GARRETT, MICHAEL W
Address: 4417 BEACH BLVD, #200
City-St-Zip: JACKSONVILLE, FL 32207

Title: S
Name: DAVIES, BUTCH
Address: 122 W CAMERON STREET
City-St-Zip: CULPEPER, VA 22701

Title: D
Name: CARTER, JAN S
Address: 609 HOWELLBROOK DR
City-St-Zip: VALDOSTA, GA 31602

Title: VPD
Name: FURNIVAL, LAWRENCE
Address: 185 PAWSON PARK RD
City-St-Zip: BRANFORD, CT 06405

Title: PD
Name: CARTER, WALTON T JR
Address: 609 HOWELLBROOK DR.
City-St-Zip: VALDOSTA, GA 31602

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: MICHAEL W GARRETT

TREA

01/03/2012

Electronic Signature of Signing Officer or Director

Date