

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 157412

FILED  
Feb 10, 2012  
Secretary of State

**Entity Name:** J.C. RENFROE & SONS.,INC.

**Current Principal Place of Business:**

1926 SPEARING ST  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 4279  
JACKSONVILLE, FL 32201

**New Mailing Address:**

**FEI Number:** 59-0605781

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANT,ABRAHAM,REITER, MCCORMICK & JOH P.A.  
50 N. LAURA STREET  
SUITE 2750  
JACKSONVILLE, FL 322024548 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: PD  
Name: RENFROE, ANNE L  
Address: 1926 SPEARING ST.  
City-St-Zip: JACKSONVILLE, FL 32206

Title: AS  
Name: ADAMS, LUCILLE D  
Address: 1926 SPEARING ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VD  
Name: RAYMOND, RONALD G  
Address: 1926 SPEARING ST.  
City-St-Zip: JACKSONVILLE, FL 32206

Title: T  
Name: ANDERSON, WILLIAM L  
Address: 1926 SPEARING ST  
City-St-Zip: JACKSONVILLE, FL 32206

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: WILLIAM L ANDERSON

T

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date