

# **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 235388

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** WESJAX DEVELOPMENT COMPANY

**Current Principal Place of Business:**

569 EDGEWOOD AVENUE SOUTH  
JACKSONVILLE, FL 32205 US

**New Principal Place of Business:**

**Current Mailing Address:**

569 EDGEWOOD AVENUE SOUTH  
JACKSONVILLE, FL 32205

**New Mailing Address:**

**FEI Number:** 59-0900850

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BYRD, CLIFTON R  
5340 SHORECREST DRIVE  
JACKSONVILLE, FL 32210 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: AGRICOLA, WILLIAM  
Address: 914 ATLANTIC AVE SUITE 2A  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D  
Name: MCARTHUR, WILLIAM A  
Address: 3844 TIMUGUANA ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: PD  
Name: BYRD, CLIFTON R  
Address: 5340 SHORECREST DR  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D  
Name: WADE IV, NEILL G  
Address: P.O. BOX 37355  
City-St-Zip: TALLAHASSEE, FL 32315

Title: VP  
Name: FARNELL, CLEVELAND T  
Address: 4900 ORTEGA BLVD  
City-St-Zip: JACKSONVILLE, FL 32210 US

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: CLIFTON R BYRD

PD

03/22/2012

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

\_\_\_\_\_  
Date