2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2007
Secretary of State

DOCUMENT# 742828

Entity Name: 12495, INC.

Current Principal Place of Business:

12495 3RD STREET EAST
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

12495 3RD STREET EAST
TREASURE ISLAND, FL 33706

New Mailing Address:

FEI Number: 59-2242764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZACUR, RICHARD A
MENSH, ZACUR & GRAHAM, P.A.
5200 CENTRAL AVENUE
ST PETERSBURG, FL 33707 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 ( ) Delete
Name: BILL CARROLL,
Address: 12495 3RD ST E.
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D ( ) Delete
Name: GREEN, JOHN
Address: 12495 3RD ST E.
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D ( ) Delete
Name: AMBERLY, ROBERT
Address: 12495 3RD STREET EAST
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D ( ) Delete
Name: COOK, GLYNN
Address: 12495 3RD ST., E
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLYNN R COOK D 02/09/2007

Electronic Signature of Signing Officer or Director — Date