

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000004087

Entity Name: J.G. MASTERS, INC.

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9563 MONTGOMERY ROAD  
CINCINNATI, OH 45242

**New Principal Place of Business:**

**Current Mailing Address:**

9563 MONTGOMERY ROAD  
CINCINNATI, OH 45242

**New Mailing Address:**

FEI Number: 90-0155611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MASTERS, JAMES  
11692 QUAIL VILLAGE WAY  
NAPLES, FL 34119 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: P  
Name: MASTERS, JOHN G  
Address: 5500 DRAKE ROAD  
City-St-Zip: CINCINNATI, OH 45242

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: JOHN G MASTERS

PRES

01/18/2011

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

\_\_\_\_\_  
Date