

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000005066

**FILED**  
**Feb 10, 2011**  
**Secretary of State**

**Entity Name:** PRO FIT MANAGEMENT, INC.

**Current Principal Place of Business:**

6161 KEG CREEK DRIVE  
APPLING, GA 30802

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 350  
EVANS, GA 308090120

**New Mailing Address:**

6161 KEG CREEK DRIVE  
APPLING, GA 30802

**FEI Number:** 58-2519902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAPLAN, JAY  
6151 PEACHTREE CIRCLE N  
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: CP  
Name: SMITH, BILL  
Address: 6161 KEG CREEK DRIVE  
City-St-Zip: APPLING, GA 30802

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: BILL SMITH

PRES

02/10/2011

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

\_\_\_\_\_  
Date