## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F10000002495

Entity Name: TRIFECTA JACKSONVILLE I, INC.

Apr 13, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

28035 DOROTHY DRIVE SUITE 240 28035 DOROTHY DRIVE AGOURA HILLS, CA 91301

SUITE 240

AGOURA HILLS, CA 91301 US

**Current Mailing Address: New Mailing Address:** 

28035 DOROTHY DRIVE SUITE 240 28035 DOROTHY DRIVE

SUITE 240 AGOURA HILLS, CA 91301

AGOURA HILLS, CA 91301 US

FEI Number: 27-2348888 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET

TALLAHASSEE, FL 323012525 US

CORPORATION SERVICE COMPANY 1201 HAYS STREET SUITE 240 TALLAHASSEE, FL 323012525 US

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: 04/13/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: Name: LAM, RON

28035 DOROTHY DRIVE SUITE 240 Address: City-St-Zip: AGOURA HILLS, CA 91301 US

Title: PSD

Name: NUSSBAUM, BRUCE

28035 DOROTHY DRIVE SUITE 240 Address: AGOURA HILLS, CA 91301 US City-St-Zip:

Title: PD

AUGER, MICHAEL Name:

28035 DOROTHY DRIVE SUITE 240 Address: City-St-Zip: AGOURA HILLS, CA 91301 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: BRUCE NUSSBAUM **PSD** 04/13/2011