

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000001630

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

**Entity Name:** DRIGGERS COMMERCIAL GROUP, INC.

**Current Principal Place of Business:**

2487 DEMERE RD, SUITE 200  
ST SIMONS ISLAND, GA 31522

**New Principal Place of Business:**

**Current Mailing Address:**

2487 DEMERE RD, SUITE 200  
ST SIMONS ISLAND, GA 31522

**New Mailing Address:**

**FEI Number:** 20-5991571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEAL, DAVID  
521 SOUTH FLETCHER AVENUE, SUITE A  
FERNANDINA BEACH, FL 32034 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: CVCD  
Name: DRIGGERS, ROBERT E JR  
Address: 2487 DEMERE RD, SUITE 200  
City-St-Zip: ST SIMONS ISLAND, GA 31522

Title: PVPT  
Name: DRIGGERS, ROBERT E JR  
Address: 2487 DEMERE RD, SUITE 200  
City-St-Zip: ST SIMONS ISLAND, GA 31522

Title: S  
Name: SWEAT, RUSSELL E  
Address: 2487 DEMERE RD, SUITE 200  
City-St-Zip: ST SIMONS ISLAND, GA 31522

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: ROBERT E. DRIGGERS

PRES

01/13/2012

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

\_\_\_\_\_  
Date