

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F47259

FILED
Mar 19, 2012
Secretary of State

Entity Name: CULPEPPER & JEAKLE, CPA'S, P.A.

Current Principal Place of Business:

4929 ATLANTIC BLVD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 41603
JACKSONVILLE, FL 322031603 US

New Mailing Address:

FEI Number: 59-2134094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAKLE, JOHN G JR
4929 ATLANTIC BLVD
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: PDT
Name: JEAKLE, JOHN G JR
Address: 4929 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD
Name: JEAKLE, DONNA G
Address: 1804 HOLLY FLOWER LN
City-St-Zip: FLEMING ISLAND, FL 32003

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 JEAKLE JR

PRES

03/19/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date