2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2012
Secretary of State

DOCUMENT# F82320

Entity Name: COMBINED FORMS, INC.

Current Principal Place of Business:

4554 ST JOHNS AVE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

4554 ST JOHNS AVE
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 59-2195222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, CANDACE M.
5175 CHARLEMAGNE RD.
JAX, FL 32210 US

Name and Address of New Registered Agent:

CLARK, CANDACE M
5175 CHARLEMAGNE RD.
JAX, FL 32210 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: CANDACE M CLARK 04/10/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: CLARK, CANDACE M
Address: 5175 CHARLEMAGNE RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: VS
Name: HARWOOD, MELINDA M
Address: 5048 ORTEGA FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

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: CANDACE M CLARK PRES 04/10/2012
Electronic Signature of Signing Officer or Director Date