

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000001838

Entity Name: TAYLOR GIRARD, INC.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

818 BEACH BLVD.  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

818 BEACH BLVD.  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

FEI Number: 59-3269381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BATT, MILES G JR  
818 BEACH BLVD.  
JACKSONVILLE BEACH, FL 32250 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: PD  
Name: BATT, MILES G JR  
Address: 2739 ALGONQUIN AVE.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: STD  
Name: BATT, BARBARA S  
Address: 2739 ALGONQUIN AVE.  
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: BARBARA BATT

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04/20/2011

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

\_\_\_\_\_  
Date