## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H17748

Entity Name: FPI, INC.

FILED Mar 15, 2011 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

329 N.BROAD ST. THOMASVILLE, GA 31792

Current Mailing Address: New Mailing Address:

P.O. BOX 997 THOMASVILLE, GA 31799

FEI Number: 58-1581686 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:

PROCTOR, M. JULIAN, JR. 227 SOUTH CALHOUN ST. TALLAHASSEE, FL 32302 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: AA

Name: FALLIN, THERESA L Address: 118 BAY DR

City-St-Zip: THOMASVILLE, GA 31799

Title: CPT

Name: FLOWERS, LANGDON S., JR.

Address: 3 WOODLAKES DR. City-St-Zip: THOMASVILLE, GA

Title: S

 Name:
 FLOWER, AMANDA T

 Address:
 476 WOODLAKES RD

 City-St-Zip:
 THOMASVILLE, GA 31792

Title:

Name: FLOWERS, AMANDA T

Address: 476 WOODLAKES RD City-St-Zip: TALLAHASSEE, FL 31792

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: THERESA FALLIN ADM 03/15/2011