

## **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H30491

**FILED**  
**Nov 09, 2010**  
**Secretary of State**

**Entity Name:** AL WEEKS AND ASSOCIATES, INC.

**Current Principal Place of Business:**

2110 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176

**New Principal Place of Business:**

**Current Mailing Address:**

2110 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176

**New Mailing Address:**

**FEI Number:** 59-2481772

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBINS, ROBERT  
1141 SOUTH RIDGEWOOD  
SOUTH DAYTONA, FL 32019 US

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

ROBINS, ROBERT  
1206 SOUTH RIDGEWOOD  
DAYTONA BEACH, FL 32114 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

11/09/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: NANCY DANCE  
Address: 2110 OCEAN SHORE BLVD  
City-St-Zip: ORMOND BEACH, FL 32176 US

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: LEONA WEEKS

PST

11/09/2010

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

\_\_\_\_\_  
Date