

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H68247

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Entity Name:** C.W. WRIGHT ENTERPRISES, INC.

**Current Principal Place of Business:**

2228 JERNIGAN ROAD  
P. O. BOX 14026 (ZIP 32238)  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

2228 JERNIGAN ROAD  
P. O. BOX 14026 (ZIP 32238)  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 59-2620754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WRIGHT, CHARLES W.  
8385 CHESSMAN COURT  
JACKSONVILLE, FL 32244 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: DP  
Name: WRIGHT, CHARLES W.  
Address: 8385 CHESSMAN CT.  
City-St-Zip: JACKSONVILLE, FL 32244

Title: DST  
Name: WRIGHT, JEANNIE  
Address: 8385 CHESSMAN CT.  
City-St-Zip: JACKSONVILLE, FL 32244

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: JEANNE WRIGHT

DST

04/15/2011

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

\_\_\_\_\_  
Date