

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H72011

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** M & C ARMY SURPLUS, INC.

**Current Principal Place of Business:**

626 NW 13TH ST  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

626 NW 13TH ST  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 59-2672823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HALL, CRAIG F.  
317 NORTHEAST FIRST STREET  
GAINESVILLE, FL 32602 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: P  
Name: MILLER, SUZANNE  
Address: 746 TURKEY CREEK  
City-St-Zip: ALACHUA, FL 32615

Title: STD  
Name: CASON, OLIVIA  
Address: 1403 NW 12TH ROAD  
City-St-Zip: GAINESVILLE, FL 32605

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: OLIVIA CASON

STD

02/23/2011

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

\_\_\_\_\_  
Date