

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J17137

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** HUMAN RESOURCES DEVELOPMENT SERVICES, INC.

**Current Principal Place of Business:**

609 ST JOHNS AVE  
PALATKA, FL 32177 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1864  
PALATKA, FL 321781864 US

**New Mailing Address:**

**FEI Number:** 59-2681566

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEAVER, JOHNNIE M  
609 ST JOHNS AVE  
PALATKA, FL 32177 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: PTD  
Name: WEAVER, VICKY L PRES  
Address: 101 LITTLE ACRES DRIVE  
City-St-Zip: PALATKA, FL

Title: VS  
Name: WEAVER, JOHNNIE M  
Address: 101 LITTLE ACRES DR.  
City-St-Zip: PALATKA, FL

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: VICKY WEAVER

PDT

01/04/2011

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

\_\_\_\_\_  
Date