

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J63242

Entity Name: PRO'S CHOICE, INC.

**FILED**  
**Feb 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6809 STONEHEATH LN  
PORT ORANGE, FL 32128

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 290007  
PORT ORANGE, FL 32129

**New Mailing Address:**

FEI Number: 59-2872317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LESLIE, PATRICIA L  
6809 STONEHEATH LANE  
PORT ORANGE, FL 32128 US

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

MARQUAND, PATRICIA L LESLIE  
6809 STONEHEATH LANE  
PORT ORANGE, FL 32128 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: PATRICIA L.LESLIE MARQUAND

02/09/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MARQUAND, PATRICIA L LESLIE  
Address: 6809 STONEHEATH LN  
City-St-Zip: PORT ORANGE, FL 32128

Title: P  
Name: TEMPLE, FRANK T  
Address: 1874 CREEKWATER BLVD  
City-St-Zip: DAYTONA BEACH, FL 32128

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: PATRICIA L. LESLIE MARQUAND

D

02/09/2011

Electronic Signature of Signing Officer or Director

Date