

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J89340

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** DUVAL-ATLANTIC PROPERTIES, INC.

**Current Principal Place of Business:**

1701 NORTH PEARL STREET  
JACKSONVILLE, FL 32206 US

**New Principal Place of Business:**

**Current Mailing Address:**

1701 NORTH PEARL STREET  
JACKSONVILLE, FL 32206 US

**New Mailing Address:**

**FEI Number:** 59-2860492

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSEPH, LOUIS  
1701 NORTH PEARL STREET  
JACKSONVILLE, FL 32206 US

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

JOSEPH, LOUIS  
1701 NORTH PEARL STREET  
JACKSONVILLE, FL 32206 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:** LOUIS JOSEPH

01/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** JOSEPH, LOUIS  
**Address:** 3982 CHESTWOOD AVE  
**City-St-Zip:** JACKSONVILLE, FL 32277 US

**Title:** VP  
**Name:** AZAR, VICTOR B.  
**Address:** 14763 STARRATT CREEK DR.  
**City-St-Zip:** JACKSONVILLE, FL 32226 US

**Title:** S  
**Name:** ALLOUSH, BDIWIE S.  
**Address:** 3660 SALT MEADOW COURT N.  
**City-St-Zip:** JACKSONVILLE, FL 32224 US

**Title:** T  
**Name:** JOSEPH, SCHAMOUN  
**Address:** 1401 GAY AVENUE  
**City-St-Zip:** JACKSONVILLE, FL 32207 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:** LOUIS JOSEPH

PRES

01/06/2011

Electronic Signature of Signing Officer or Director

Date