

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J97061

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** JAMES BEST ENTERPRISES, INC.

**Current Principal Place of Business:**

41 NIGHT HERON PLACE  
HICKORY, NC 28601 US

**New Principal Place of Business:**

**Current Mailing Address:**

41 NIGHT HERON PLACE  
HICKORY, NC 28601 US

**New Mailing Address:**

2425 N CENTER STREET  
#177  
HICKORY, NC 28601 US

**FEI Number:** 59-2848708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEST, DOROTHY C VP/SEC  
41 NIGHT HERON PLACE  
HICKORY, FL 28601 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: D  
Name: BEST, JAMES K  
Address: 41 NIGHT HERON PLACE  
City-St-Zip: HICKORY, NC 28601

Title: D  
Name: BEST, DOROTHY C  
Address: 41 NIGHT HERON PLACE  
City-St-Zip: HICKORY, NC 28601

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: DOROTHY C BEST

VP/S

03/17/2011

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

\_\_\_\_\_  
Date