

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K03123

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** SMALL BUSINESS ASSOCIATES INC.

**Current Principal Place of Business:**

4070 HERSCHEL STREET  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

**Current Mailing Address:**

4984 ORTEGA FOREST  
JACKSONVILLE, FL 32210 US

**New Mailing Address:**

FEI Number: 59-2863389

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ADAMS, SCOTT L  
4984 ORTEGA FOREST DRIVE  
JACKSONVILLE, FL 32210 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: DPT  
Name: ADAMS, SCOTT L.  
Address: 4984 ORTEGA FOREST DR  
City-St-Zip: JACKSONVILLE, FL

Title: DSV  
Name: ADAMS, CRYSTAL H.  
Address: 4984 ORTEGA FOREST DR  
City-St-Zip: JACKSONVILLE, 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: SCOTT L ADAMS

DPT

04/27/2012

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

\_\_\_\_\_  
Date