

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L42646

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** ADVANCED REPROGRAPHICS, INC.

**Current Principal Place of Business:**

2207A NW 13TH ST  
GAINESVILLE, FL 32609 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 357670  
GAINESVILLE, FL 326357670 US

**New Mailing Address:**

**FEI Number:** 59-2986224

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, JOHN R.  
2207-A NW 13TH STREET  
GAINESVILLE, FL 32609 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** WILLIAMS, JOHN R.  
**Address:** 2207-A NW 13TH ST  
**City-St-Zip:** GAINESVILLE, FL 32609

**Title:** D  
**Name:** CADWALLADER, M. STEPHEN  
**Address:** 2207-A NW 13TH ST  
**City-St-Zip:** GAINESVILLE, FL 32609

**Title:** S  
**Name:** WILLIAMS, CHERYL R  
**Address:** 2207-A NW 13TH ST  
**City-St-Zip:** GAINESVILLE, FL 32609

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:** JOHN R WILLIAMS

VP

01/05/2010

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

\_\_\_\_\_  
Date