

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99250

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** EXCELLENT DESIGNER HOMES OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

8160 BAYMEADOW WAY WEST  
#340  
JACKSONVILLE BEACH, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

8160 BAYMEADOW WAY WEST  
#340  
JACKSONVILLE BEACH, FL 32256

**New Mailing Address:**

**FEI Number:** 59-3031692

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUEN, MARY L  
917 FIRST STREET SOUTH  
#502  
JACKSONVILLE BEACH, FL 32250 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: PRES  
Name: RUEN, MARY LEE (POLLY)  
Address: 917 FIRST STREET SOUTH, UNIT 502  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP  
Name: WILSON, SHERRILL  
Address: 492 NEWPORT DRIVE  
City-St-Zip: ORANGE PARK, FL 32073

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: MARY RUEN

PRES

01/05/2012

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

\_\_\_\_\_  
Date