

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006985

FILED  
Mar 31, 2010  
Secretary of State

Entity Name: AMPLIFY, INC.

**Current Principal Place of Business:**

3519 HERSCHEL ST  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

**Current Mailing Address:**

1142 MAPLETON RD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 20-1465640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GANNAM, ROGER K  
12276 SAN JOSE BLVD SUITE 126  
LINDELL, FARSON & PINCKET, PA  
JACKSONVILLE, FL 32203 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: RIDER, CECILE  
Address: 1121 MORVENWOOD RD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: P  
Name: STAKE, CAROLINE  
Address: 1142 MAPLETON RD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: V  
Name: STAKE, IAN  
Address: 1142 MAPLETON RD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D  
Name: JOEL, BOB  
Address: 1988 CAMELLIA OAKS LANE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D  
Name: GLOVER, KEVIN  
Address: 1172 DURBIN PARKE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32259

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLINE L. STAKE

P

03/31/2010

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

\_\_\_\_\_  
Date