

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010245

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** REVEREND OTIS J. LOCKE II, INC.

**Current Principal Place of Business:**

12126 CAP FERRAT STREET  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

12126 CAP FERRAT STREET  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 56-2524955

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOCKE, PAMELA  
12126 CAP FERRAT STREET  
JACKSONVILLE, FL 32224 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: LOCKE, OTIS J  
Address: 12126 CAP FERRAT STREET  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D  
Name: LOCKE, PAMELA  
Address: 12126 CAP FERRAT STREET  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D  
Name: LACY, JENNIFER  
Address: 12181 CALAIS STREET  
City-St-Zip: JACKSONVILLE, FL 32224

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: PAMELA LOCKE

D

04/26/2011

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

\_\_\_\_\_  
Date