

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010236

FILED
Apr 28, 2011
Secretary of State

Entity Name: THE GJA CORP.

Current Principal Place of Business:

57022 ALDERMAN DRIVE
YULEE, FL 32097 US

New Principal Place of Business:

57041 ALDERMAN DRIVE
YULEE, FL 32097 US

Current Mailing Address:

57022 ALDERMAN DRIVE
YULEE, FL 32097 US

New Mailing Address:

57041 ALDERMAN DRIVE
YULEE, FL 32097 US

FEI Number: 26-1273637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMMONS, JAMES C SR
101 DOGWOOD CIRCLE
ST. MARYS, FL 31558 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: DIR
Name: AMMONS, JAMES C SR.
Address: 101 DOGWOOD CIRCLE
City-St-Zip: ST. MARYS, GA 31558 US

Title: DIR
Name: JORDAN, PEARL
Address: 836 BONAPARTE LANDING BLVD
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: DIR
Name: ROBERTS, HERMAN
Address: 57041 ALDERMAN DRIVE
City-St-Zip: YULEE, FL 32097 US

Title: PRES
Name: AMMONS, CLARA M
Address: 101 DOGWOOD CIRCLE
City-St-Zip: ST. MARYS, GA 31558 US

Title: SEC
Name: ROBERTS, ANNETTE M
Address: 57041 ALDERMAN DRIVE
City-St-Zip: YULEE, FL 32097 US

Title: TREA
Name: ALDERMAN, RALPH
Address: 57022 ALDERMAN DRIVE
City-St-Zip: YULEE, FL 32097 US

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: JAMES C AMMONS

DIR

04/28/2011

Electronic Signature of Signing Officer or Director

Date