2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2012
Secretary of State

DOCUMENT# N07000011354

Entity Name: ANCIENT CITY PRIDE, INC.

Current Principal Place of Business:

216 BLUEBIRD LN.
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

516 VISTA RIA CT.
ST. AUGUSTINE, FL 32080

Current Mailing Address:

PO BOX 1392
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 26-1470952 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UVEGES, BRUCE A
516 VISTA RIA CT.
ST. AUGUSTINE, FL 32080 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: MR
Name: BALLARD, GEORGE L
Address: 516 VISTA RIA CT.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MR
Name: PHILLIPS, JEFFREY C
Address: 6540 PINE CIRCLE N
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: MR
Name: BARKER, SHAWN
Address: 149 ABBOTTS WAY
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: MR
Name: BRANCH, DENNIS
Address: 37 ROHDE AVENUE, APT. 1
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MS
Name: ROSS, DIANE
Address: 3975 SOUTH FRANCIS
City-St-Zip: ST. AUGUSTINE, FL 32092

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: JEFFREY C. PHILLIPS TRE 04/18/2012
Electronic Signature of Signing Officer or Director — Date