

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004176

FILED
Feb 01, 2012
Secretary of State

Entity Name: THE 5 & DIME, INC.

Current Principal Place of Business:

7150 DEERFOOT POINT CIRCLE
UNIT 2
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

7150 DEERFOOT POINT CIRCLE
UNIT 2
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 45-2052456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COBB, STACI
7150 DEERFOOT CIRCLE
UNIT 2
JACKSONVILLE, FL 32256 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: GOULD, EVAN
Address: 1885 BLUEBONNET WAY
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: D
Name: HAMBY, LEE
Address: 12814 GILLESPIE AVENUE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: D
Name: SALAME, ZEINA
Address: 20 MIRROR LAKE DRIVE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D
Name: WALLER, JOSH
Address: 2849 HERSCHEL STREET
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: D
Name: BUTTERLEY, CARYL
Address: 923 PARKRIDGE CIRCLE EAST
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: D
Name: TAYLOR, JOSHUA
Address: 421 WEST CHURCH STREET # 674
City-St-Zip: JACKSONVILLE, FL 32202

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: LEE HAMBY

MR

02/01/2012

Electronic Signature of Signing Officer or Director

Date