

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 05, 2012
Secretary of State

DOCUMENT# N11000008920

Entity Name: PIT SISTERS, INC.**Current Principal Place of Business:**14286-19 BEACH BLVD #234
JACKSONVILLE, FL 32250**New Principal Place of Business:****Current Mailing Address:**14286-19 BEACH BLVD #234
JACKSONVILLE, FL 32250**New Mailing Address:****FEI Number:** 32-0355003**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WATSON, ROBERT J
14440 PELICAN BAY CT.
JACKSONVILLE, FL 32224 US**Name and Address of New Registered Agent:**WATSON, ROBERT J
14286-19 BEACH BLVD #234
JACKSONVILLE, FL 32250 US

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: _____

08/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WATSON, JENNIFER
Address: 14286-19 BEACH BLVD #234
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: V
Name: TURNER, SYBIL
Address: 14286-19 BEACH BLVD #234
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: S
Name: WATSON, ROBERT J
Address: 14286-19 BEACH BLVD #234
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: T
Name: VAUTIER-CYR, LYNETTE
Address: 14286-19 BEACH BLVD #234
City-St-Zip: JACKSONVILLE, FL 32250 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: SYBIL TURNER

V

08/05/2012

Electronic Signature of Signing Officer or Director

Date