

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027232

Entity Name: 696, INC.

FILED  
Apr 30, 2009  
Secretary of State

**Current Principal Place of Business:**

696 1ST AVENUE NORTH  
STE 400  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 729  
ST PETERSBURG, FL 337310729

**New Mailing Address:**

FEI Number: 59-3642293

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELL, BRIAN E  
696 1ST AVENUE N  
ST E 400  
ST. PETERSBURG, FL 33701 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: BELL, BRIAN E  
Address: 696 1ST AVE N.  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S ( ) Delete  
Name: DEL CORSO, NICHOLAS  
Address: 3 BELLEVUE DRIVE  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D ( ) Delete  
Name: COFFEEN, THOMAS  
Address: 10108 TARPON DRIVE  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D ( ) Delete  
Name: MEJIA, H. JOHN  
Address: 155 RAMONWAY NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN BELL

PT

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date