

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000059334

Entity Name: DUVAL MAINTENANCE, INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

9310 OLD KINGS RD S  
802  
JACKSONVILLE, FL 32257

## **New Principal Place of Business:**

9310 OLD KINGS RD S  
902  
JACKSONVILLE, FL 32257

## **Current Mailing Address:**

9310 OLD KINGS RD S  
802  
JACKSONVILLE, FL 32257

## **New Mailing Address:**

9310 OLD KINGS RD S  
902  
JACKSONVILLE, FL 32257

FEI Number: 59-3663401

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MURPHY, APRYL C  
9310 OLD KINGS RD S  
SUITE 802  
JACKSONVILLE, FL 32257 US

## **Name and Address of New Registered Agent:**

MURPHY, APRYL C  
9310 OLD KINGS RD S  
SUITE 902  
JACKSONVILLE, FL 32257 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/30/2012

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: MURPHY, APRYL C  
Address: 9310 OLD KINGS RD S 902  
City-St-Zip: JACKSONVILLE, FL 32257

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: APRYL C MURPHY

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date