

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099779

**FILED**  
**Mar 08, 2012**  
**Secretary of State**

**Entity Name:** GOFF AND ASSOCIATES, INC.

**Current Principal Place of Business:**

4204 SOUTH FLORIDA AVENUE  
SUITE D  
LAKELAND, FL 338132124

**New Principal Place of Business:**

2933 SOUTH FLORIDA AVENUE  
SUITE 5  
LAKELAND, FL 33803

**Current Mailing Address:**

4204 SOUTH FLORIDA AVENUE  
SUITE D  
LAKELAND, FL 338132124

**New Mailing Address:**

2933 SOUTH FLORIDA AVENUE  
SUITE 5  
LAKELAND, FL 33803

**FEI Number:** 59-3678716

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOFF, P. RENEE  
322 BOGER BOULEVARD, N.  
LAKELAND, FL 338034402 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: P  
Name: GOFF, P RENEE  
Address: 322 BOGER BLVD N  
City-St-Zip: LAKELAND, FL 33803

Title: VP  
Name: GOFF, JAMES W  
Address: 5620 ANNETTE ST  
City-St-Zip: LAKELAND, FL 33810

Title: ST  
Name: GOFF, PEGGY J  
Address: 5620 ANNETTE ST  
City-St-Zip: LAKELAND, FL 33810

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: P. RENEE GOFF

PRES

03/08/2012

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

\_\_\_\_\_  
Date