

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000010418

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** GREG RHOADS & ASSOCIATES INC.

**Current Principal Place of Business:**

3565 CARDINAL POINT DRIVE  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

3895 OLDFIELD TRAIL  
SUITE B  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

3565 CARDINAL POINT DRIVE  
JACKSONVILLE, FL 32257

**New Mailing Address:**

11111-70 SAN JOSE BLVD.  
SUITE 194  
JACKSONVILLE, FL 32223

**FEI Number:** 59-3695327

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RHOADS, GREG  
3895 OLDFIELD TRAIL  
JACKSONVILLE, FL 32223 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: RHOADS, GREG  
Address: 3895 OLDFIELD TRAIL  
City-St-Zip: JACKSONVILLE, FL 32223

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: GREG A. RHOADS

DIR

04/22/2011

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

\_\_\_\_\_  
Date