

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121181

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** HESSROCK INVESTMENTS NO. 1, INC.

**Current Principal Place of Business:**

10950-013 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

10950 SAN JOSE BOULEVARD  
SUITE 13  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

12931 TREE WAY LANE  
JACKSONVILLE, FL 32258

**New Mailing Address:**

**FEI Number:** 80-0004165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLEMAN, C. RANDOLPH  
9250 BAYMEADOWS ROAD, SUITE 230  
JACKSONVILLE, FL 322561813 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: P  
Name: ROCKWELL, RUSSELL A  
Address: 12931 TREE WAY LANE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: V  
Name: HESS, JOHN L  
Address: 2429 CAMDEN LAKE VIEW, N.W.  
City-St-Zip: ACWORTH, GA 30101

Title: T  
Name: ROCKWELL, RUSSELL A  
Address: 12931 TREE WAY LANE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: S  
Name: HESS, JOHN L  
Address: 2429 CAMDEN LAKE VIEW, N.W.  
City-St-Zip: ACWORTH, GA 30101

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: RUSSELL A. ROCKWELL

P

03/30/2010

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

\_\_\_\_\_  
Date