

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073501

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: NUFLO, INC.

**Current Principal Place of Business:**

3440-1 EVERGREEN AVENUE  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3251  
JACKSONVILLE, FL 32206

**New Mailing Address:**

FEI Number: 04-3701469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLD, KATHLEEN H  
ONE INDEPENDENT DRIVE  
SUITE 2301  
JACKSONVILLE, FL 32202 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: GOELZ, WILLIAM T  
Address: PO BOX 3251  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D  
Name: GOELZ, JOHN H  
Address: PO BOX 3251  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D  
Name: GOELZ, THOMAS C  
Address: PO BOX 3251  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D  
Name: LICAUSI, JOHN  
Address: PO BOX 3251  
City-St-Zip: JACKSONVILLE, FL 32206

Title: CTRL  
Name: CONDERMAN, JOHN F  
Address: PO BOX 3251  
City-St-Zip: JACKSONVILLE, FL 32206

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: JOHN CONDERMAN

CTRL

01/05/2012

Electronic Signature of Signing Officer or Director

Date