

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003271

Entity Name: GEMINI LOGISTICS, INC.

FILED
Apr 18, 2011
Secretary of State

Current Principal Place of Business:

8535 POSEY ROAD
JACKSONVILLE, FL 32220

New Principal Place of Business:

Current Mailing Address:

8535 POSEY ROAD
JACKSONVILLE, FL 32220

New Mailing Address:

FEI Number: 27-0045956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, PATRICIA C MRS
8535 POSEY RD
JACKSONVILLE, FL 32220 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: MARTINEZ, RALPH J
Address: 8535 POSEY ROAD
City-St-Zip: JACKSONVILLE, FL 32220

Title: D
Name: MARTINEZ, PATRICIA C
Address: 8535 POSEY ROAD
City-St-Zip: JACKSONVILLE, FL 32220

Title: PRES
Name: MARTINEZ, PATRICIA C MRS
Address: 8535 POSEY RD
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: VP
Name: DELK, COLLEEN E MRS
Address: 8535 POSEY RD
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: VP
Name: MARTINEZ, RALPH J MR
Address: 8535 POSEY RD
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: ST
Name: MARTINEZ, PATRICIA C MRS
Address: 8535 POSEY RD
City-St-Zip: JACKSONVILLE, FL 32220 US

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: PATRICIA C. MARTINEZ

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04/18/2011

Electronic Signature of Signing Officer or Director

Date