

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009815

FILED
Apr 18, 2011
Secretary of State

Entity Name: FORD PROP OF FLORIDA, INC.

Current Principal Place of Business:

115 1/2 E. INDIANA AVENUE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 457
DELAND, FL 327210457

New Mailing Address:

FEI Number: 54-2093451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ELIZABETH F
115 1/2 E. INDIANA AVENUE
DELAND, FL 32724 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: PD
Name: FORD, FRANK A
Address: POST OFFICE BOX 457
City-St-Zip: DELAND, FL 327210457

Title: D
Name: FORD, SARAH R
Address: POST OFFICE BOX 457
City-St-Zip: DELAND, FL 327210457

Title: D
Name: PENROD, JEAN F
Address: POST OFFICE BOX 457
City-St-Zip: DELAND, FL 327210457

Title: VD
Name: VEECH, ALEX B JR.
Address: POST OFFICE BOX 457
City-St-Zip: DELAND, FL 327210457

Title: D
Name: VEECH, RAY F
Address: POST OFFICE BOX 457
City-St-Zip: DELAND, FL 327210457

Title: STD
Name: WILLIAMS, ELIZABETH F
Address: POST OFFICE BOX 457
City-St-Zip: DELAND, FL 327210457

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: ELIZABETH FORD WILLIAMS

STD

04/18/2011

Electronic Signature of Signing Officer or Director

Date