

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000026735

Entity Name: TWELVEELEVEN, INC.

**FILED**  
**Mar 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

14001 CASHON FALLS COURT  
JACKSONVILLE, FL 322244899 US

**New Principal Place of Business:**

**Current Mailing Address:**

14001 CASHON FALLS COURT  
JACKSONVILLE, FL 322244899 US

**New Mailing Address:**

FEI Number: 59-3769106

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOWARD A. CAPLAN, ATTORNEY, P.A.  
6260 DUPONT STATION CT  
STE C  
JACKSONVILLE, FL 32217 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: P/S  
Name: SPENCE, STEPHEN M  
Address: 14001 CASHON FALLS CT  
City-St-Zip: JACKSONVILLE, FL 322244899 US

Title: VTC  
Name: SPENCE, JAN H  
Address: 14001 CASHON FALLS CT  
City-St-Zip: JACKSONVILLE, FL 322244899 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: JAN H SPENCE

VP

03/27/2011

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

\_\_\_\_\_  
Date