2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000062736

Entity Name: TOM SAWYER INDUSTRIES, INC.

FILED Feb 24, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13729 CRASHAW ROAD

JACKSONVILLE, FL 32224

13729 CRASHAW ROAD

13729 CRASHAW RD

JACKSONVILLE, FL 32224

JACKSONVILLE, FL 32224

Current Mailing Address: New Mailing Address:

P.O. BOX 330768
ATLANTIC BEACH, FL 32233
P.O. BOX 330768
13729 CRASHAW RD
ATLANTIC BEACH, FL 32233

FEI Number: 81-0617895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

 O'NEILL, KAREN B
 O'NEILL, KAREN B

 1009 21 ST N
 1009 21 ST N

 JACKSONVILLE BEACH, FL 32250
 US
 13729 CRASHAW RD

JACKSONVILLE BEACH, FL 32250 US

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: 02/24/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP

Name: SAWYER, THOMAS R SR.
Address: 13729 CRASHAW ROAD
City-St-Zip: JACKSONVILLE, FL 32224

Title: DVST

 Name:
 SAWYER, SHERI L

 Address:
 13729 CRASHAW ROAD

 City-St-Zip:
 JACKSONVILLE, FL
 32224

Title: DVST

Name: SAWYER, SHERI L Address: PO BOX 330768

City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DP

Name: SAWYER, THOMAS R SR., Address: PO BOX 330768 City-St-Zip: ATLANTIC BEACH, FL 32233

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: SHERI L. SAWYER DVST 02/24/2011