

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077515

Entity Name: CHRISTOPHERS JOY, INC.

FILED  
Feb 16, 2011  
Secretary of State

**Current Principal Place of Business:**

1835 WELFORD ROAD  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1835 WELFORD ROAD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 51-0474061      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CHRISTOPHER, SAMUEL  
1835 WELFORD ROAD  
JACKSONVILLE, FL 32207      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: CHRISTOPHER, SAMUEL  
Address: 1835 WELFORD ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD  
Name: CHRISTOPHER, SAMUEL  
Address: 1835 WELFORD, RD  
City-St-Zip: JACKSONVILLE, FL 32207

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: SAMUEL CHRISTPOHER

PD

02/16/2011

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

\_\_\_\_\_ Date