

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133303

Entity Name: TERRY POTTS, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

4401 COMANCHE TR BLVD
JACKSONVILLE, FL 3225P

New Principal Place of Business:

Current Mailing Address:

4401 COMANCHE TR BLVD
JACKSONVILLE, FL 3225P

New Mailing Address:

FEI Number: 73-1686720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POTTS, TERRY
4401 COMANCHE TR BLVD
JACKSONVILLE, FL 3225P 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: POTTS, TERRY
Address: 4401 COMANCHE TR BLVD
City-St-Zip: JACKSONVILLE, FL 3225P

Title: VD () Delete
Name: POTTS, DAVID
Address: 4401 COMANCHE TR BLVD
City-St-Zip: JACKSONVILLE, FL 3225P

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY POTTS

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date