

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000133303

Entity Name: TERRY POTTS, INC.

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

4401 COMANCHE TR BLVD  
JACKSONVILLE, FL 3225P

## **New Principal Place of Business:**

4401 COMANCHE TR BLVD  
JACKSONVILLE, FL 32259

## **Current Mailing Address:**

4401 COMANCHE TR BLVD  
JACKSONVILLE, FL 3225P

## **New Mailing Address:**

4401 COMANCHE TR BLVD  
JACKSONVILLE, FL 32259

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:**

POTTS, TERRY  
4401 COMANCHE TR BLVD  
JACKSONVILLE, FL 32259 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: TERRY POTTS

03/04/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: POTTS, TERRY  
Address: 4401 COMANCHE TR BLVD  
City-St-Zip: JACKSONVILLE, FL 32259

Title: VD  
Name: POTTS, DAVID  
Address: 4401 COMANCHE TR BLVD  
City-St-Zip: JACKSONVILLE, FL 32259

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: TERRY POTTS

PRES

03/04/2011

Electronic Signature of Signing Officer or Director

Date