

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142659

**FILED**  
**Feb 22, 2012**  
**Secretary of State**

**Entity Name:** APPLE BOX PRODUCTIONS, INC.

**Current Principal Place of Business:**

2771-29 MONUMENT RD  
#370  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

1063 HAINES ST  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

2771-29 MONUMENT RD  
#370  
JACKSONVILLE, FL 32225

**New Mailing Address:**

1063 HAINES ST  
JACKSONVILLE, FL 32206

**FEI Number:** 20-0478429

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARROLL, THOMAS P  
12412 SAN JOSE BLVD.  
SUITE 101  
JACKSONVILLE, FL 32233 US

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

HOWELL, SUMMER M  
1063 HAINES STREET  
JACKSONVILLE, FL 32206 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: SUMMER HOWELL

02/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HOWELL, ANDREW PRES  
Address: 2771-29 MONUMENT RD #370  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP  
Name: HOWELL, SUMMER VP  
Address: 2771-29 MONUMENT RD #370  
City-St-Zip: JACKSONVILLE, FL 32225

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: SUMMER HOWELL

VP

02/22/2012

Electronic Signature of Signing Officer or Director

Date