

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000073189

Entity Name: ACHIEVIA DIRECT, INC.

**FILED**  
**Jan 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1293 N. US HWY 1., STE 1  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

1293 N. US HWY 1., STE 1  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 20-1125385

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOLEIALT, LAUREN Y  
404 NORTH HALIFAX AVE  
DAYTONA BEACH, FL 32118 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: BANKER, MATTHEW T  
Address: 1293 N. US HWY 1., STE 1  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD  
Name: KOLEILAT, LAUREN Y  
Address: 1293 N. US HWY 1., STE 1  
City-St-Zip: ORMOND BEACH, FL 32174

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: MATTHEW BANKER

PRES

01/13/2011

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

\_\_\_\_\_  
Date