

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000077321

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** NORTH FLORIDA REALTY SERVICES, INC.

**Current Principal Place of Business:**

6028 CHESTER AVENUE  
#206B  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

**Current Mailing Address:**

6844 MADRID AVENUE  
JACKSONVILLE, FL 32217

**New Mailing Address:**

**FEI Number:** 20-1116822

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIEGRIST, KAREN C  
6844 MADRID AVENUE  
JACKSONVILLE, FL 32217 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: PT  
Name: SIEGRIST, KAREN C  
Address: 6844 MADRID AVENUE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: VPS  
Name: CONNOR, MARY ANNE  
Address: 1725 FURMAN ROAD  
City-St-Zip: JACKSONVILLE, FL 32217

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:** KAREN C SIEGRIST

PT

04/20/2010

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

\_\_\_\_\_  
Date