2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081168

8511 COLLINS RIDGE BLVD. N.

JACKSONVILLE, FL 32244

Address:

City-St-Zip:

Entity Name: SOLID FOUNDATION OF JACKSONVILLE INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 528 CEDAR ARBOR CT ST AUGUSTINE, FL 32084 **Current Mailing Address: New Mailing Address:** 528 CEDAR ARBOR COURT 528 CEDAR ARBOR CT ST. AUGUSTINE, FL 32084 ST AUGUSTINE, FL 32084 FEI Number: 35-2231483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARESMA, BRANDON CPA 324 6TH AVE. NORTH JACKSONVILLE BEACH, FL 32250 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LYONS, GEORGE T SR Name: Name: 528 CEDAR ARBOR CT. Address: Address: City-St-Zip: ST AUGUSTINE, 32 32277 City-St-Zip: Title: Title: () Change () Addition () Delete Name: LYONS, WILLIAM D 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: GEORGE T. LYONS PRES 04/28/2009