

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084344

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Entity Name:** GENUS LOCI STUDIO, CORP

**Current Principal Place of Business:**

1404 DEL PRADO BLVD. SOUTH  
120  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

15437 ORLANDA DRIVE  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

PO BOX 2847  
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

**FEI Number:** 20-1177173      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ELKINS, CHAD C  
15437 ORLANDA DRIVE  
BONITS SPRINGS, FL FL 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:** P  
**Name:** ELKINS, CLARENCE C  
**Address:** 15437 ORLANDA DRIVE  
**City-St-Zip:** BONITA SPRINGS, FL 34135

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: C. CHAD ELKINS

PRES

01/31/2012

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

\_\_\_\_\_ Date