

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132121

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** BISHOP ENTERPRISE OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

2601 ROLAC RD.  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

6299-9 POWERS AVENUE  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

2601 ROLAC RD.  
JACKSONVILLE, FL 32207

**New Mailing Address:**

6299-9 POWERS AVENUE  
JACKSONVILLE, FL 32217

FEI Number: 36-4567030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MACIEJEWSKI, DONALD M  
ONE INDEPENDENT DRIVE  
SUITE 3306  
JACKSONVILLE, FL 32202 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: BISHOP, WILLIAM D  
Address: 1554 CORNELL ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD  
Name: BISHOP, DARLENE  
Address: 1554 CORNELL ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

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: WILLIAM D BISHOP

PD

03/05/2012

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

\_\_\_\_\_ Date