

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000019234

Entity Name: DRACO VENTURES, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8252 COUNTRY CREEK BLVD.  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

4746 BIRKENHEAD RD/  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

POST OFFICE BOX 61396  
JACKSONVILLE, FL 322361396

**New Mailing Address:**

FEI Number: 56-2500592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOLE, ROBERT A  
8252 COUNTRY CREEK BLVD.  
JACKSONVILLE, FL 32221 US

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

BOLE, ROBERT A  
4746 BIRKENHEAD RD.  
JACKSONVILLE, FL 32210 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: ROBERT BOLE

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: BOLE, ROBERT A  
Address: POST OFFICE BOX 61396  
City-St-Zip: JACKSONVILLE, FL 322361396

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: ROBERT BOLE

PSD

04/29/2011

Electronic Signature of Signing Officer or Director

Date