

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000047442

Entity Name: JUSTIN A. MORRIS, INC.

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

P. O. BOX 2474  
LAKE PLACID, FL 33862

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2474  
LAKE PLACID, FL 33862

**New Mailing Address:**

FEI Number: 20-2537571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRIS, JUSTIN A  
1535 BUCK ST  
LAKE PLACID, FL 33862 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: DP  
Name: MORRIS, JUSTIN A  
Address: P. O. BOX 2474  
City-St-Zip: LAKE PLACID, FL 33862

Title: SEC  
Name: HAILE, JENIFER L  
Address: 1535 BUCK ST  
City-St-Zip: LAKE PLACID, FL 33852

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: JENIFER L HAILE

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03/31/2010

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

\_\_\_\_\_  
Date