

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103937

Entity Name: GREAT ADVICE, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

13900 CR 455  
UNIT 109-322  
CLERMONT, FL 34711 US

## Current Mailing Address:

13900 CR 455  
UNIT 109-322  
CLERMONT, FL 34711 US

## New Principal Place of Business:

13900 CR 455  
# 107-322  
CLERMONT, FL 34711 US

## New Mailing Address:

13900 CR 455  
# 107-322  
CLERMONT, FL 34711 US

FEI Number: 20-3210658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOUTHWEST PROFESSIONAL SERVICES OF S FL IN  
13571 MCGREGOR BLVD #22  
FORT MYERS, FL 33919 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: P ( ) Delete  
Name: DUVALL, TONNA  
Address: 13900 CR 455 UNIT 107-322  
City-St-Zip: CLERMONT, FL 34711 US

Title: VP ( ) Delete  
Name: DUVALL, JOHN  
Address: 13900 CR 455 UNIT 107-322  
City-St-Zip: CLERMONT, FL 34711 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DUVALL, TONNA  
Address: 13900 CR 455, # 107-322  
City-St-Zip: CLERMONT, FL 34711 US

Title: VP (X) Change ( ) Addition  
Name: DUVALL, JOHN  
Address: 13900 CR 455, # 107-322  
City-St-Zip: CLERMONT, FL 34711 US

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: JOHN DUVALL

VP

04/20/2009

Electronic Signature of Signing Officer or Director

Date