

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000109089

Entity Name: ASHLEY R. WREN, P.A.

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3728 TUMBLING OAKS  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 23175  
JACKSONVILLE, FL 32241

**New Mailing Address:**

FEI Number: 75-3198768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WREN, ASHLEY R MANAGER  
6817 SOUTHPOINT PARKWAY  
SUITE 102  
JACKSONVILLE, FL 32241 US

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

WREN, ASHLEY R MANAGER  
6817 SOUTHPOINT PARKWAY  
SUITE 1504  
JACKSONVILLE, FL 32241 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: ASHLEY R WREN

Electronic Signature of Registered Agent

03/07/2011

Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: WREN, ASHLEY R  
Address: 3728 TUMBLING OAKS  
City-St-Zip: JACKSONVILLE, FL 32223

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: ASHLEY R WREN

Electronic Signature of Signing Officer or Director

PRES

03/07/2011

Date