

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000122671

Entity Name: JC AUDIOLOGY, INC.

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1541 DALE MABRY HWY.  
SUITE 201  
LUTZ, FL 33548 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

1541 DALE MABRY HWY.  
SUITE 201  
LUTZ, FL 33548 US

## **New Mailing Address:**

1541 DALE MABRY HWY.  
SUITE 201  
LUTZ, FL 33548 US

FEI Number: 68-0612829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REESE, CHARLES R  
19907 READING ROAD  
LUTZ, FL 33558 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: P  
Name: REESE, CHARLES R  
Address: 19907 READING ROAD  
City-St-Zip: LUTZ, FL 33558 US

Title: VP  
Name: REESE, JUDITH L  
Address: 19907 READING ROAD  
City-St-Zip: LUTZ, FL 33558 US

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: CHARLES R. REESE

PRES

01/06/2011

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

\_\_\_\_\_  
Date