

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000166871

**Entity Name:** J.D. FOUNTAIN SERVICES, INC.

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3924 WILD VIOLET AVENUE  
SEBRING, FL 33870

**New Principal Place of Business:**

215 PLANTATION DR  
SEBRING, FL 33876

**Current Mailing Address:**

3924 WILD VIOLET AVENUE  
SEBRING, FL 33870

**New Mailing Address:**

215 PLANTATION DR  
SEBRING, FL 33876

**FEI Number:** 20-4085942

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRISCILLA GERARD  
2100 LAKEVIEW DRIVE  
SEBRING, FL 33870 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: PD  
Name: FOUNTAIN, J.D.  
Address: 3924 WILD VIOLET AVENUE  
City-St-Zip: SEBRING, FL 33870

Title: VPD  
Name: FOUNTAIN, ROBERT L  
Address: 3924 WILD VIOLET AVENUE  
City-St-Zip: SEBRING, FL 33870 US

Title: TD  
Name: HUTER, ERIK  
Address: PO BOX 428  
City-St-Zip: SEBRING, FL 33871 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: JD FOUNTAIN

PD

04/13/2011

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

\_\_\_\_\_  
Date