

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000008695

Entity Name: AMY GRASS-GILMORE, P.A.

FILED  
Feb 17, 2011  
Secretary of State

## Current Principal Place of Business:

519 N. NEWNAN STREET  
SUITE 2  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

## Current Mailing Address:

519 N. NEWNAN STREET  
SUITE 2  
JACKSONVILLE, FL 32202

## New Mailing Address:

FEI Number: 20-4159145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRASS-GILMORE, AMY  
519 N. NEWNAN STREET  
SUITE 2  
JACKSONVILLE, FL 32202 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: PVST  
Name: GRASS-GILMORE, AMY  
Address: 519 N. NEWNAN STREET, SUITE 2  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D  
Name: GRASS-GILMORE, AMY  
Address: 519 N. NEWNAN STREET, SUITE 2  
City-St-Zip: JACKSONVILLE, FL 32202

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: AMY BRET GRASS-GILMORE

PVST

02/17/2011

Electronic Signature of Signing Officer or Director

Date