

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000029586

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** GRAHAM & GRAHAM ENTERPRISES, INC.

**Current Principal Place of Business:**

365 WEKIVA SPRINGS RD.  
SUITE 101A  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

365 WEKIVA SPRINGS RD.  
SUITE 101A  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** 59-3138837

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAHAM, BARRY M  
365 WEKIVA SPRINGS RD.  
SUITE 101A  
LONGWOOD, FL 32779 US

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

GRAHAM, MARCETTA  
365 WEKIVA SPRINGS RD.  
SUITE 101A  
LONGWOOD, FL 32779 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: MARCETTA GRAHAM

04/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GRAHAM, MARCETTA  
Address: 365 WEKIVA SPRINGS RD SUITE 101 A  
City-St-Zip: LONGWOOD, FL 32779

Title: V  
Name: GRAHAM, BARRY  
Address: 365 WEKIVA SPRINGS RD. SUITE 101A  
City-St-Zip: LONGWOOD, FL 32779

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: BARRY GRAHAM

V

04/13/2012

Electronic Signature of Signing Officer or Director

Date