

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036869

Entity Name: FOR THE INJURED, INC.

FILED
Feb 18, 2011
Secretary of State

Current Principal Place of Business:

4114 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

4114 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 65-0371275 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: GORDON, ROBERT E
Address: 6124 WILD CAT RUN
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: VP
Name: DONER, ADAM S
Address: 465 JUNO DUNES WAY
City-St-Zip: JUNO BEACH, FL 33480 US

Title: D
Name: CALAMILSA, STEVEN E
Address: 1743 W. COMMUNITY DRIVE
City-St-Zip: JUPITER, FL 33458 US

Title: D
Name: WILLIAMS, DANIEL G
Address: 1209 MERLOT DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410 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: ROBERT E. GORDON

P

02/18/2011

Electronic Signature of Signing Officer or Director

Date