2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# P06000061749

Entity Name: HANDICAP SERVICES OF JACKSONVILLE, INC.

Current Principal Place of Business:

3624 BRIDGEWOOD DR.
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

3624 BRIDGEWOOD DR.
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 20-5457088 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEPRELL, SAMUEL L.
1930 SAN MARCO BLVD., STE. 201, ST. MARKS PLACE
JACKSONVILLE, FL 32207 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: D
Name: EL-BAHRI, ANDRE
Address: 3624 BRIDGEWOOD DR.
City-St-Zip: JACKSONVILLE, FL 32277

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: ANDRE BAHRI D 04/30/2012

Electronic Signature of Signing Officer or Director — Date