

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068223

FILED  
Mar 13, 2011  
Secretary of State

**Entity Name:** IDIGANSWERS RESEARCH ASSOCIATES INC.

**Current Principal Place of Business:**

5848 PARKSTONE CROSSING  
UNIT 58145, BOX 3  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

**Current Mailing Address:**

5848 PARKSTONE CROSSING  
UNIT 58145, BOX 3  
JACKSONVILLE, FL 32258

**New Mailing Address:**

**FEI Number:** 68-0630137

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURR, KAREN KOSTER ESQ.  
1301 RIVERPLACE BOULEVARD  
SUITE 1916  
JACKSONVILLE, FL 32207 US

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

ADAMS, RUDY  
5848 PARKSTONE CROSSING  
UNIT 58145, BOX 3  
JACKSONVILLE, FL 32258 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: RUDY J. ADAMS

03/13/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ADAMS, RUDY J  
Address: 5848 PARKSTONE CROSSING, UNIT 58145, BOX 3  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP  
Name: ADAMS, SHEILA A  
Address: 5848 PARKSTONE CROSSING, UNIT 58145, BOX 3  
City-St-Zip: JACKSONVILLE, FL 32258

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: RUDY J. ADAMS

P

03/13/2011

Electronic Signature of Signing Officer or Director

Date