

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080091

FILED  
Mar 07, 2011  
Secretary of State

Entity Name: JOEY GRAHAM, INC.

**Current Principal Place of Business:**

25230 SHERWOOD DRIVE  
LAND O LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

25230 SHERWOOD DRIVE  
LAND O LAKES, FL 34639

**New Mailing Address:**

FEI Number: 20-5039385

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRAHAM, JOSEPH  
25230 SHERWOOD DRIVE  
LAND O LAKES, FL 34639 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: CD  
Name: GRAHAM, JOEY  
Address: 25230 SHERWOOD DRIVE  
City-St-Zip: LAND O LAKES, FL 346395527

Title: P  
Name: GRAHAM, JOSEPH  
Address: 25230 SHERWOOD DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VP  
Name: GRAHAM, BRIAN J  
Address: 25230 SHERWOOD DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: T  
Name: GRAHAM, STEPHEN J  
Address: 25230 SHERWOOD DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: SEC  
Name: GRAHAM, ROSE  
Address: 25230 SHERWOOD DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: ASEC  
Name: CLAUSELL, BARBARA J  
Address: 25230 SHERWOOD DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

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: JOSEPH GRAHAM

P

03/07/2011

Electronic Signature of Signing Officer or Director

Date