

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000091796

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** TRUSTEE AND RA SERVICES INC.

**Current Principal Place of Business:**

9688 ROYAL PALM BLVD  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

4634 MONUMENT POINT CIR  
JACKSONVILLE, FL 32225 US

**Current Mailing Address:**

9688 ROYAL PALM BLVD  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

4634 MONUMENT POINT CIR  
JACKSONVILLE, FL 32225 US

**FEI Number:** 20-5312637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAMM, CHARLES F  
9688 ROYAL PALM BLVD  
CORAL SPRINGS, FL 33065 US

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

LAMM, CHARLES F  
4634 MONUMENT POINT CIR  
JACKSONVILLE, FL 32225 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:** CHARLES F LAMM

04/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** LAMM, CHARLES F  
**Address:** 4634 MONUMENT POINT CIR  
**City-St-Zip:** JACKSONVILLE, FL 32225 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:** CHARLES F LAMM

PSTD

04/26/2011

Electronic Signature of Signing Officer or Director

Date