

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117817

Entity Name: IN TWO DEEP, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

1254 FISH HOOK WAY
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

4423 COQUINA DR.
JACKSONVILLE, FL 32250 US

Current Mailing Address:

PO BOX 51262
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

FEI Number: 20-5708061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, THOMAS H JR.
2119 RIVERSIDE AVE.
JACKSONVILLE, FL 32204 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ATKINS, JOHN D
Address: PO BOX 5162
City-St-Zip: JACKSONVILLE BEACH, FL 32240

Title: VP/S (X) Delete
Name: BROWNE, KEVIN
Address: 6964 RAMOTH DR.
City-St-Zip: JACKSONVILLE, FL 32226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN ATKINS

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date