

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000057280

Entity Name: R.M.PIGOTT, INC.

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

501-F NW 23RD AVE.  
GAINESVILLE, FL 32609 US

**New Principal Place of Business:**

501-D NW 23RD AVE.  
GAINESVILLE, FL 32609 US

**Current Mailing Address:**

P.O. BOX 5277  
GAINESVILLE, FL 32627 US

**New Mailing Address:**

FEI Number: 26-0168904      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

J & S ACCOUNTING AND TAX  
6045 SE U.S. HIGHWAY 301  
HAWTHORNE, FL 32640 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: P  
Name: PIGOTT, RONNIE M  
Address: 501-D NW 23RD AVE.  
City-St-Zip: GAINESVILLE, FL 32609 US

Title: ST  
Name: PIGOTT, LORA E  
Address: 501-D NW 23RD AVE.  
City-St-Zip: GAINESVILLE, FL 32609 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: LORA E PIGOTT

ST

04/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date