

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000078730

Entity Name: JOHN WARD DESIGNS, INC.

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4723 BIRKENHEAD RD.  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4723 BIRKENHEAD RD.  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 26-0527910

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUTCHENS, JAMES G JR.  
106 CANAL BLVD., SUITE B  
PONTE VEDRA BCH, FL 32082 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: PD  
Name: WARD, JOHN  
Address: 4723 BIRKENHEAD RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: STD  
Name: WARD, SUSANNE  
Address: 4723 BIRKENHEAD RD.  
City-St-Zip: JACKSONVILLE, FL 32210

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: JOHN WARD

PD

03/02/2011

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

\_\_\_\_\_  
Date