

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000100377

**Entity Name:** ONE DISTRIBUTION, INC.

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5109 STEPP AVENUE  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1732  
PONTE VEDRA BEACH, FL 32004

**New Mailing Address:**

**FEI Number:** 51-0647819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DILL, JOSEPH  
8818 GOODBYS EXECUTIVE DRIVE  
100  
JACKSONVILLE, FL 32217 US

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

ANSBACHER & ASSOCIATES  
8818 GOODBYS EXECUTIVE DRIVE  
100  
JACKSONVILLE, FL 32217 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: ANSBACHER & ASSOCIATES

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: OBI, EDWARD L JR  
Address: PO BOX 1732  
City-St-Zip: PONTE VEDRA BEACH, FL 32004

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: EDWARD L. OBI, JR.

PD

05/01/2012

Electronic Signature of Signing Officer or Director

Date