

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105662

FILED
Feb 15, 2012
Secretary of State

Entity Name: A FAMILY HAIR CARE OF WALTON COUNTY INC

Current Principal Place of Business:

1760 HWY 83 N
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

Current Mailing Address:

1760 HWY 83 N
DEFUNIAK SPRINGS, FL 32433

New Mailing Address:

FEI Number: 26-1106090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, PATRICIA
1760 HWY 83 N
DEFUNIAK SPRINGS, FL 32433 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: ROBINSON, PATRICIA
Address: 1760 HWY 83 N
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: VP
Name: ROBINSON, TERRY
Address: 1760 HWY 83 N
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: SEC
Name: BURGESS, JONI M
Address: 1760 HWY 83N
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: PATRICIA ROBINSON

P

02/15/2012

Electronic Signature of Signing Officer or Director

Date