

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000004515

Entity Name: WWRA INC

**FILED**  
**Feb 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6418 BARTHOLF AVE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

6145 HARLOW BLVD.  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

6418 BARTHOLF AVE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

6145 HARLOW BLVD.  
JACKSONVILLE, FL 32210

FEI Number: 26-1749769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARMONDI, WAYNE  
6418 BARTHOLF AVE  
JACKSONVILLE, FL 32210 US

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

ARMONDI, WAYNE  
6145 HARLOW BLVD  
JACKSONVILLE, FL 32210 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: WAYNE R ARMONDI

02/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: ARMONDI, WAYNE  
Address: 6145 HARLOW BLVD  
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: WAYNE ARMONDI

PRES

02/04/2012

Electronic Signature of Signing Officer or Director

Date