

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000017339

Entity Name: ALLYN JON PALMER INC.

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

11237 WATER SPRING CIRCLE  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

11237 WATER SPRING CIRCLE  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 26-1959071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMER, ALLYN J PRESIDE  
11237 WATER SPRING CIRCLE  
JACKSONVILLE, FL 32256 US

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

PALMER, ALLYN J  
11237 WATER SPRING CIRCLE  
JACKSONVILLE, FL 32256 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: ALLYN J. PALMER

04/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: PALMER, ALLYN J  
Address: 11237 WATER SPRING CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32256

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: ALLYN J. PALMER

PRES

04/24/2012

Electronic Signature of Signing Officer or Director

Date