

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000058642

**FILED**  
**Mar 12, 2011**  
**Secretary of State**

**Entity Name:** SMOKERS VIDEO IV OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

10150 BEACH BLVD  
UNIT 13  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 622094  
OVIEDO, FL 32762

**New Mailing Address:**

**FEI Number:** 26-2815331

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURRIS, GREGORY  
1672 ONONDAGA DR.  
GENEVA, FL 32732 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: D  
Name: BURRIS, GREGORY F  
Address: P.O. BOX 622094  
City-St-Zip: OVIEDO, FL 32762 US

Title: D  
Name: BROWN, RONALD E JR  
Address: P.O. BOX 622094  
City-St-Zip: OVIEDO, FL 32762 US

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: GREG BURRIS

D

03/12/2011

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

\_\_\_\_\_  
Date