

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000069270

FILED
Apr 20, 2010
Secretary of State

Entity Name: BREAKING THE SILENCE JACKSONVILLE, INC.

Current Principal Place of Business:

6320 GROVE STREET
JACKSONVILLE, FL 32219

New Principal Place of Business:

Current Mailing Address:

13528 ASHFORD WOOD COURT, WEST
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, DR. SIRRETTA L
13528 ASHFORD WOOD COURT, WEST
JACKSONVILLE, FL 32218 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: WILLIAMS, DR. SIRRETTA L
Address: 13528 ASHFORD WOOD COURT, WEST
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP
Name: COLES, LAVERANUES
Address: 87 COLES COURT
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: S
Name: WAKEFIELD, BARBARA
Address: 10935 WINGATE ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: T
Name: DAVIS, CARISSA D
Address: 2197 ARMSDALE ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: AUSTIN, FELICIA C
Address: 502 LONG PINE DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: D
Name: WYNN, RENALDO
Address: 9504 EMPIRE ROAD
City-St-Zip: LAS VEGAS, NV 89143

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: SIRRETTA WILLIAMS

PRES

04/20/2010

Electronic Signature of Signing Officer or Director

Date