

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000071737

Entity Name: MICROZYMA, INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1712 HENDRICKS AVE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1712 HENDRICKS AVE  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 26-3088193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEARD, GUY S  
1712 HENDRICKS AVE  
JACKSONVILLE, FL 32207 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: DP  
Name: BEARD, GUY  
Address: 1712 HENDRICKS AVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: DV  
Name: BEARD, IAN  
Address: 1712 HENDRICKS AVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: DST  
Name: BEARD, LINDA  
Address: 1712 HENDRICKS AVE  
City-St-Zip: JACKSONVILLE, FL 32207

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: GUY S BEARD

DP

04/30/2012

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

\_\_\_\_\_  
Date