

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000008496

FILED  
Mar 28, 2011  
Secretary of State

**Entity Name:** FLORIDA FRANCHISE SERVICES, INC.

**Current Principal Place of Business:**

13194 U.S. HWY. 301 S.  
SUITE 334  
RIVERVIEW, FL 33578

**New Principal Place of Business:**

**Current Mailing Address:**

13194 U.S. HWY. 301 S.  
SUITE 334  
RIVERVIEW, FL 33578

**New Mailing Address:**

**FEI Number:** 27-1786111

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDONOUGH, LINDA  
13194 U.S. HWY. 301 S.  
SUITE 334  
RIVERVIEW, FL 33578 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: MRS  
Name: MARON, TIFFANY A  
Address: 13194 U.S. HWY. 301 S. SUITE 203  
City-St-Zip: RIVERVIEW, FL 33578

Title: MRS  
Name: MCDONOUGH, LINDA  
Address: 903 NE 15TH STREET  
City-St-Zip: RUSKIN, FL 33570

Title: MR  
Name: MARON, SEAN  
Address: 13194 U.S. HWY. 301 S. SUITE 203  
City-St-Zip: RIVERVIEW, FL 33578

Title: MR  
Name: MCDONOUGH, THOMAS A  
Address: 903 NE 15TH STREET  
City-St-Zip: RUSKIN, FL 33570

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: LINDA MCDONOUGH

MRS

03/28/2011

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

\_\_\_\_\_  
Date