

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000062035

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** SPJ INC.

**Current Principal Place of Business:**

15721 SONOMA DRIVE  
#301  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

12518 IVORY STONE LOOP  
FORT MYERS, FL 33913 US

**Current Mailing Address:**

15721 SONOMA DRIVE  
#301  
FORT MYERS, FL 33908 US

**New Mailing Address:**

12518 IVORY STONE LOOP  
FORT MYERS, FL 33913 US

**FEI Number:** 90-0596399

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

CAPE CORAL BOOKKEEPING  
1321 NELSON ROAD NORTH  
CAPE CORAL, FL 33993 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:** JANE A. WAGNER

03/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PTSD  
**Name:** JONES, SHAWN P MR.  
**Address:** 12518 IVORY STONE LOOP  
**City-St-Zip:** FORT MYERS, FL 33913 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:** SHAWN PAUL JONES

PTSD

03/21/2012

Electronic Signature of Signing Officer or Director

Date