

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000071490

Entity Name: SALES AWAY, INC.

**FILED**  
**Jan 22, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

15640 CRYSTAL LAKE DRIVE #102  
NORTH FORT MYERS, FL 33917

**New Principal Place of Business:**

5600 LONGLEAF DR.  
NORTH FORT MYERS, FL 33917

**Current Mailing Address:**

15640 CRYSTAL LAKE DRIVE #102  
NORTH FORT MYERS, FL 33917

**New Mailing Address:**

5600 LONGLEAF DR.  
NORTH FORT MYERS, FL 33917

FEI Number: 36-4678145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAVAGE, SHIRLEY  
15640 CRYSTAL LAKE DRIVE #102  
NORTH FORT MYERS, FL 33917 US

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

SAVAGE, SHIRLEY  
5600 LONGLEAF DR.  
NORTH FORT MYERS, FL 33917 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

01/22/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SAVAGE, SHIRLEY  
Address: 5600 LONGLEAF DR.  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: SHIRLEY SAVAGE

PRES

01/22/2012

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

\_\_\_\_\_  
Date