

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000104054

Entity Name: ERICA JOLLES P.A.

FILED  
Mar 23, 2011  
Secretary of State

**Current Principal Place of Business:**

320 SPARROW BRANCH CIRCLE  
ST. JOHNS, FL 32259 US

**New Principal Place of Business:**

**Current Mailing Address:**

320 SPARROW BRANCH CIRCLE  
ST. JOHNS, FL 32259 US

**New Mailing Address:**

FEI Number: 27-4393938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOLLES, JAMIE  
7545 CENTURION PARKWAY  
206  
JACKSONVILLE, FL 32256 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: P, D  
Name: JOLLES, ERICA  
Address: 320 SPARROW BRANCH CIRCLE  
City-St-Zip: ST. JOHNS, FL 32259 US

Title: T, S  
Name: JOLLES, ERICA  
Address: 320 SPARROW BRANCH CIRCLE  
City-St-Zip: ST. JOHNS, FL 32259 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: ERICA JOLLES

MS.

03/23/2011

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

\_\_\_\_\_ Date