2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000017299

Entity Name: FIRST COAST THRIFT SHOPPE, INC.

FILED Apr 10, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11570 #5 SAN JOSE BOULEVARD 616 STATE ROAD 13 UNIT 1 JACKSONVILLE, FL 32241 JACKSONVILLE, FL 32259 US

Current Mailing Address: New Mailing Address:

11570 #5 SAN JOSE BOULEVARD 616 STATE ROAD 13 UNIT 1 JACKSONVILLE, FL 32241 JACKSONVILLE, FL 32259 US

FEI Number: 27-5507425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARROL, THOMAS BEHNKEN, BRIAN P 12412-101 SAN JOSE BOULEVARD 931 GALLIÈR PLACE

JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32259 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: BRIAN P BEHNKEN 04/10/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

BEHNKEN, JOYCE A Name: 931 GALLIER PLACE Address:

City-St-Zip: JACKSONVILLE, FL 32259 US

Title:

Name: BEHNKEN, BRIAN P 931 GALLIER PLACE Address: JACKSONVILLE, FL 32259 US City-St-Zip:

Title:

BEHNKEN, JOYCE A Name: 931 GALLIER PLACE Address:

City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VΡ

BEHNKEN, BRIAN P Name: Address: 931 GALLIER PLACE

City-St-Zip: JACKSONVILLE, 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.

VΡ SIGNATURE: BRIAN P BEHNKEN 04/10/2012