

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000100796

FILED  
Feb 17, 2012  
Secretary of State

**Entity Name:** THOMAS S JENKINS AND ASSOCIATES INC.

**Current Principal Place of Business:**

222 W. 42ND ST  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

222 W. 42ND ST  
JACKSONVILLE, FL 32208

**New Mailing Address:**

**FEI Number:** 45-3866913

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JENKINS, TYNEKA L  
222 W. 42ND ST  
JACKSONVILLE, FL 32208 US

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

WOOTEN, TYNEKA L  
222 W. 42ND ST  
JACKSONVILLE, FL 32208 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: TYNEKA L WOOTEN

02/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WOOTEN, TYNEKA L  
Address: 222 W. 42ND ST  
City-St-Zip: JACKSONVILLE, FL 32208

Title: CEO  
Name: JENKINS, WILLIAM JR.  
Address: 222 W. 42ND ST  
City-St-Zip: JACKSONVILLE, FL 32208

Title: COO  
Name: JENKINS, GLORIA A  
Address: 222 W. 42ND ST  
City-St-Zip: JACKSONVILLE, FL 32208

Title: VP  
Name: TUCKER, NATALSYA S  
Address: 222 W. 42ND ST  
City-St-Zip: JACKSONVILLE, FL 32208

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: TYNEKA L WOOTEN

P

02/17/2012

Electronic Signature of Signing Officer or Director

Date