

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000052694

**Entity Name:** TRANSIT PLUS, INC.

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

**Current Principal Place of Business:**

58 W. 9TH STREET  
ATLANTIC BEACH, FL 32233 US

**New Principal Place of Business:**

**Current Mailing Address:**

58 W. 9TH STREET  
ATLANTIC BEACH, FL 32233 US

**New Mailing Address:**

13707 LITTLE HARBOR CT.  
JACKSONVILLE, FL 32225 US

**FEI Number:** 59-3255331

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKREL, DEBRA  
13707 LITTLE HARBOR COURT  
JACKSONVILLE, FL 32225 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: PVTs  
Name: JACKREL, DEBRA  
Address: 13707 LITTLE HARBOR CT.  
City-St-Zip: JACKSONVILLE, FL 32225

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: DEBRA JACKREL

PRES

03/22/2012

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

\_\_\_\_\_  
Date