

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089385

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** EFFICIENCY OFFICE SUPPLY & SHIPPING CENTER, INC.

**Current Principal Place of Business:**

309 SW PARK ST  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

309 SW PARK ST  
OKEECHOBEE, FL 34972

**New Mailing Address:**

FEI Number: 65-0627737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRANE, MARCIA G  
309 SW PARK ST  
OKEECHOBEE, FL 34972 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: D  
Name: CRANE, MARCIA G  
Address: 309 SW PARK ST  
City-St-Zip: OKEECHOBEE, FL 34972

Title: PT  
Name: CRANE, MARCIA G  
Address: 309 SW PARK ST  
City-St-Zip: OKEECHOBEE, FL 34972

Title: VPS  
Name: CRANE, ANTHONY  
Address: 309 SW PARK ST  
City-St-Zip: OKEECHOBEE, FL 34972

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: MARCIA CRANE

PRES

03/23/2012

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

\_\_\_\_\_ Date