



2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000102868 1. Entity Name AVONDALE SEARCH INTERNATIONAL, INC.						FILED 12 MAY 17 PM 11:59 	
Principal Place of Business 1177 GARRISON DR ST AUGUSTINE, FL 32092 US				Mailing Address 1177 GARRISON DR ST AUGUSTINE, FL 32092 US			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent FINLEY-AGUILERA, MARGOT 1177 GARRISON DR ST AUGUSTINE, FL 32092				7. Name and Address of New Registered Agent Name RAKO Street Address (P.O. Box Number is Not Acceptable) 50 NORTH LAMA ST SUITE 3300 City JACKSONVILLE FL Zip Code 32202			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
FILE NOW!!! FEE IS \$550.00 Due by September 28, 2012				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
REMITTED BY MAY 1							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES FINLEY-AGUILERA, MARGOT 1177 GARRISON DR ST AUGUSTINE, FL 32092			TITLE NAME STREET ADDRESS CITY-ST-ZIP	500235247345 05/17/12--01018--020 **150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u>Margot Finley</u> <u>5/1/12</u> <u>margot@avondalesearch.com</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE E-MAIL ADDRESS</small>							