

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000102945

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** BAXTER ENTERPRISES OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

2603 SHADES CLIFF CIRCLE  
JASPER, AL 35504

**New Principal Place of Business:**

**Current Mailing Address:**

2603 SHADES CLIFF CIRCLE  
JASPER, AL 35504 US

**New Mailing Address:**

**FEI Number:** 59-3422161

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANT, ABRAHAM, REITER, & MCCORMICK, PA  
50 N LAURA STREET  
SUITE 3100  
JACKSONVILLE, FL 32202 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:** MAE RICE FRANCES BAXTER  
**Address:** 2603 SHADES CLIFF CIRCLE  
**City-St-Zip:** JASPER, AL 35504 US

**Title:** D  
**Name:** LIONEL F. BAXTER, JR.  
**Address:** 2603 SHADES CLIFF CIRCLE  
**City-St-Zip:** JASPER, AL 35504 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.

**SIGNATURE:** LIONEL F BAXTER JR

D

03/02/2011

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

\_\_\_\_\_  
Date