

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000103355

Entity Name: EQUI-FUND, INC.

**FILED**  
**Mar 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

465 PLAZA DRIVE  
EUSTIS, FL 32726 US

**New Principal Place of Business:**

**Current Mailing Address:**

465 PLAZA DRIVE  
EUSTIS, FL 32726 US

**New Mailing Address:**

FEI Number: 65-0716140

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BORESS, ALLAN  
465 PLAZA DRIVE  
EUSTIS, FL 32726 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: MR  
Name: BORESS, ALLEN  
Address: 465 PLAZA DRIVE  
City-St-Zip: EUSTIS, FL 32726

Title: MRS.  
Name: BORESS, CHRISTINE  
Address: 37006 N. THRILL HILL ROAD  
City-St-Zip: EUSTIS, FL 32736

Title: S  
Name: JONATHAN, BORESS  
Address: 9771 SW 52ND RD  
City-St-Zip: GAINESVILLE, FL 32608

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: ALLEN BORESS

PRES

03/19/2011

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

\_\_\_\_\_  
Date