

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000013108

**FILED**  
**Feb 11, 2011**  
**Secretary of State**

**Entity Name:** B. J. PHELPS, INC.

**Current Principal Place of Business:**

400 S WOODLAND BLVD  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

400 S WOODLAND BLVD  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 59-3427194

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRABTREE, SHANNON  
400 S WOODLAND BLVD  
DELAND, FL 32720 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: PVT  
Name: CRABTREE, SHANNON  
Address: 400 S. WOODLAND BLVD  
City-St-Zip: DELAND, FL 32720

Title: D  
Name: CRABTREE, SHANNON  
Address: 400 S. WOODLAND BLVD  
City-St-Zip: DELAND, FL 32720

Title: S  
Name: PHELPS, BETTY J  
Address: 570 PLEASANT RUN DR  
City-St-Zip: DELAND, FL 32724

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: SHANNON CRABTREE

P

02/11/2011

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

\_\_\_\_\_ Date