

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000033133

Entity Name: SIMWRIGHT, INC.

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

2053 FOUNTAIN PROFESSIONAL COURT  
SUITE A  
NAVARRE, FL 32566 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

PO BOX 5370  
NAVARRE, FL 32566 US

## **New Mailing Address:**

FEI Number: 59-3441803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CHRISTOPHER, KERRY D  
2053 FOUNTAIN PROFESSIONAL COURT  
A  
NAVARRE, FL 32566 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: P  
Name: CHRISTOPHER, KERRY D  
Address: 7400 OTTER POINT RD.  
City-St-Zip: NAVARRE, FL 32566

Title: VP  
Name: MATTHEWS, NORMAN D  
Address: 9370 CHELMESFORD CT.  
City-St-Zip: NAVARRE, FL 32566

Title: VP  
Name: COTHERN, DOUGLAS W  
Address: 2013 WOODFERN PATH  
City-St-Zip: FORT WALTON BEACH, FL 32547

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: KERRY D. CHRISTOPHER

P

01/10/2012

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

\_\_\_\_\_  
Date