

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000051745

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** ITS ALL GOOD ENTERPRISES, INC.

**Current Principal Place of Business:**

465 TRESKA RD.  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

465 TRESKA RD.  
JACKSONVILLE, FL 32225

**New Mailing Address:**

**FEI Number:** 59-3515763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONLEY, BRIAN  
465 TRESKA RD.  
JACKSONVILLE, FL 32225 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: CONLEY, BRIAN  
Address: 465 TRESKA RD.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP  
Name: CONLEY, MIKE  
Address: 465 TRESKA RD.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP  
Name: CONLEY, GREG  
Address: 465 TRECA RD.  
City-St-Zip: JACKSONVILLE, FL 32225

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: BRIAN CONLEY

P

03/12/2012

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

\_\_\_\_\_  
Date