

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000085458

Entity Name: JASON OF CITRUS, INC.

FILED  
Apr 06, 2011  
Secretary of State

## Current Principal Place of Business:

5783 WEST SHORE DR.  
NEW PORT RICHEY, FL 34652

## New Principal Place of Business:

## Current Mailing Address:

5783 WEST SHORE DR.  
NEW PORT RICHEY, FL 34652

## New Mailing Address:

FEI Number: 59-3603569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TEROVOLAS, JASON  
5783 WEST SHORE DR.  
NEW PORT RICHEY, FL 34652 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: KARRAS, ANNA  
Address: 5783 WEST SHORE DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D  
Name: TEROVOLAS, JASON  
Address: 5783 WEST SHORE DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D  
Name: TEROVOLAS, JOHN  
Address: 5783 WEST SHORE DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D  
Name: TEROVOLAS, POTOULA  
Address: 5783 WEST SHORE DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D  
Name: TEROVOLAS, JAMES  
Address: 5783 WEST SHORE DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: JAMES TEROVOLAS

D

04/06/2011

Electronic Signature of Signing Officer or Director

Date