

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S16224

FILED
Mar 31, 2011
Secretary of State

Entity Name: DIMENSION ONE MANAGEMENT, INC.

Current Principal Place of Business:

7865 SOUTHSIDE BLVD
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

7865 SOUTHSIDE BLVD
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 59-3035910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SELIGMAN, KAREN J
7865 SOUTHSIDE BLVD
JACKSONVILLE, FL 32256 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: PD
Name: SELIGMAN, KAREN J
Address: 7865 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: SDVP
Name: SELIGMAN, MICHAEL C
Address: 7865 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP,T
Name: CAPECE, DANIEL G
Address: 7865 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP-B
Name: SELIGMAN, SANFORD L
Address: 915 KNOLL CREST COURT
City-St-Zip: ALPHARETTA, GA 30004 US

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: KAREN J. SELIGMAN

MGR

03/31/2011

Electronic Signature of Signing Officer or Director

Date