

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S45746

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Entity Name:** PLANOGRAMMING SOLUTIONS, INC.

**Current Principal Place of Business:**

9080 GOLFSIDE DRIVE  
JACKSONVILLE, FL 322567793 US

**New Principal Place of Business:**

**Current Mailing Address:**

9080 GOLFSIDE DRIVE  
JACKSONVILLE, FL 322567793 US

**New Mailing Address:**

**FEI Number:** 59-3083469

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOODLIEF, MITCHEL E.  
225 E CHURCH ST  
JACKSONVILLE, FL 32202 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: DPT  
Name: BECTON, DANIEL A.  
Address: 7934 MCLAURIN ROAD NORTH  
City-St-Zip: JACKSONVILLE, FL 32256

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: DANIEL A BECTON

PRES

04/02/2012

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

\_\_\_\_\_  
Date