

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V70501

FILED
Feb 06, 2012
Secretary of State

Entity Name: JOHN C. EMERSON, III, INC.

Current Principal Place of Business:

966 CANDLELIGHT BLVD.
BROOKSVILLE, FL 34601 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1931
BROOKSVILLE, FL 346051931 US

New Mailing Address:

FEI Number: 59-3147538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANUEL, CLIFFORD E SR.
966 CANDLELIGHT BLVD.
BROOKSVILLE, FL 34601 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: DAVID, JOSEPH D
Address: 315 HOWELL AVE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D
Name: MANUEL, CLIFFORD E SR.
Address: 966 CANDLELIGHT BLVD.
City-St-Zip: BROOKSVILLE, FL

Title: D
Name: MOUNTAIN, LYNN L
Address: 23250 TURKEY TROT LANE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D
Name: MANUEL, PAUL A
Address: 7026 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

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: CLIFFORD E. MANUEL SR.

D

02/06/2012

Electronic Signature of Signing Officer or Director

_____ Date