## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004176

Entity Name: THE 5 & DIME, INC.

FILED
Mar 22, 2013
Secretary of State
CC7372706610

**Current Principal Place of Business:** 

7150 DEERFOOT POINT CIRCLE

UNIT 2

JACKSONVILLE, FL 32256

## **Current Mailing Address:**

7150 DEERFOOT POINT CIRCLE UNIT 2 JACKSONVILLE, FL 32256 US

FEI Number: 45-2052456 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COBB, STACI 7150 DEERFOOT CIRCLE UNIT 2 JACKSONVILLE, FL 32256 US

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

## Officer/Director Detail:

Title D Title D

Name GOULD, EVAN Name HAMBY, LEE

Address 1885 BLUEBONNET WAY Address 12814 GILLESPIE AVENUE City-State-Zip: FLEMING ISLAND FL 32003 City-State-Zip: JACKSONVILLE FL 32218

Title D Title D

Name SALAME, ZEINA Name WALLER, JOSH

Address 20 MIRROR LAKE DRIVE Address 2849 HERSCHEL STREET

City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: JACKSONVILLE FL 32205

Title D Title D

Name BUTTERLEY, CARYL Name TAYLOR, JOSHUA

Address 923 PARKRIDGE CIRCLE EAST Address 421 WEST CHURCH STREET # 674

City-State-Zip: JACKSONVILLE FL 32211 City-State-Zip: JACKSONVILLE FL 32202

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEE HAMBY VICE PRESIDENT 03/22/2013