

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000004678

Entity Name: ALCORN, WARD, & PARTNERS, INC.**Current Principal Place of Business:**3314 LAKE EFFIE CT. N.
JACKSONVILLE, FL 32277**Current Mailing Address:**2771-29 MONUMENT RD. #329
JACKSONVILLE, FL 32225**FEI Number:** 20-0549395**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PINDER, DESIREE A
261 PORTA ROSA CIRCLE
SAINT AUGUSTINE, FL 32092 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	VP
Name	PINDER, DESIREE A
Address	4902 BOAT LANDING DR.
City-State-Zip:	SAINT AUGUSTINE FL 32092

Title	DIR.
Name	PINDER, DESIREE A
Address	4902 BOAT LANDING DR.
City-State-Zip:	SAINT AUGUSTINE FL 32092

Title	P
Name	ELKINS, DIANE P
Address	10243 BRIGADE DR.
City-State-Zip:	FAIRFAX VA 22031

Title	DIR.
Name	ELKINS, DIANE P
Address	10243 BRIGADE DR.
City-State-Zip:	FAIRFAX VA 22031

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: DESIREE PINDER**CP/DIRECTOR****04/16/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date