

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000000274

**Entity Name:** JASON PHITIDES, INC.

**Current Principal Place of Business:**

11932 MILLER CIRCLE WEST  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

11932 MILLER CIRCLE WEST  
JACKSONVILLE, FL 32218

**FEI Number:** 03-0613080

**Certificate of Status Desired:** No

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

PHITIDES, JASON  
11932 MILLER CIRCLE W  
JACKSONVILLE, FL 32218 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  
Name            PHITIDES, JASON  
Address        11932 MILLER CIRCLE WEST  
City-State-Zip: JACKSONVILLE FL 32218

Title            D  
Name            PHITIDES, SHANE U  
Address        1060 NEW BERLIN RD  
City-State-Zip: JACKSONVILLE FL 32218

*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:** JASON PHITIDES

**DIRECTOR**

**04/27/2014**

Electronic Signature of Signing Officer/Director Detail

Date