

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11669

FILED
Jan 09, 2012
Secretary of State

Entity Name: NORMAN T. ROBERTS, P.A.

Current Principal Place of Business:

% NORMAN T ROBERTS
50 W MASHTA DRIVE, STE 4
KEY BISCAYNE, FL 33149

New Principal Place of Business:

NORMAN T ROBERTS
50 W MASHTA DRIVE, STE 4
KEY BISCAYNE, FL 33149

Current Mailing Address:

% NORMAN T ROBERTS
50 W MASHTA DRIVE, STE 4
KEY BISCAYNE, FL 33149

New Mailing Address:

NORMAN T ROBERTS
50 W MASHTA DRIVE, STE 4
KEY BISCAYNE, FL 33149

FEI Number: 59-2047667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, NORMAN T ESQ.
50 W MASHTA DRIVE, SUITE 4
KEY BISCAYNE, FL 33149 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: DP
Name: ROBERTS, NORMAN T
Address: 50 WEST MASHTA DR., STE. 4
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: NORMAN T. ROBERTS

DP

01/09/2012

Electronic Signature of Signing Officer or Director

Date