

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000106164

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** PRESSURE MANAGEMENT GROUP, INC.

**Current Principal Place of Business:**

5357 RAMONA BLVD  
STE 1  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

5351 RAMONA BLVD  
STE 7 & 8  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

6817 SOUTHPOINT PARKWAY  
STE 903  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 59-3755333      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BROWN, EVE  
6817 SOUTHPOINT PARKWAY  
SUITE 903  
JACKSONVILLE, FL 32216 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:** PRES  
**Name:** COLSON, ANITA R  
**Address:** 6817 SOUTHPOINT PARKWAY, STE 903  
**City-St-Zip:** JACKSONVILLE, FL 32216

**Title:** VP  
**Name:** COLSON, KESSLER G  
**Address:** 6817 SOUTHPOINT PARKWAY, STE 903  
**City-St-Zip:** JACKSONVILLE, FL 32216

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: ANITA R COLSON

PRES

04/26/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date