

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000052505

FILED
Apr 22, 2011
Secretary of State

Entity Name: MOORE HEARING ASSOCIATES, INC.

Current Principal Place of Business:

594 SE SOUTHWOOD TRAIL
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

594 SE SOUTHWOOD TRAIL
STUART, FL 34997 US

New Mailing Address:

FEI Number: 81-0621138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILBRICK, LINDA L
3399 PGA BOULEVARD, SUITE 240
RUTHERFORD MULHALL, P.A.
PALM BEACH GARDENS,, FL 33410 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: P
Name: MOORE, JOHN D
Address: 594 SOUTHEAST SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997 US

Title: VP
Name: MOORE, JOHN D
Address: 594 SOUTHEAST SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997 US

Title: T
Name: MOORE, JOHN D
Address: 594 SOUTHEAST SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997 US

Title: S
Name: MOORE, JOHN D
Address: 594 SOUTHEAST SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997 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: LINDA PHILBRICK ON BEHALLF OF JOHN MOORE

RA

04/22/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date