

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000017526

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** GLENN M. COOPER & ASSOCIATES, P.A.

**Current Principal Place of Business:**

150 SOUTH PINE ISLAND RD.  
SUITE 540  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

1222 SKYLARK DRIVE  
WESTON, FL 33327 US

**Current Mailing Address:**

150 SOUTH PINE ISLAND RD.  
SUITE 540  
PLANTATION, FL 33324 US

**New Mailing Address:**

1222 SKYLARK DRIVE  
WESTON, FL 33327 US

**FEI Number:** 20-0660104

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COOPER, GLENN M  
150 SOUTH PINE ISLAND RD.  
SUITE 540  
PLANTATION, FL 33324 US

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

COOPER, GLENN M  
1222 SKYLARK DRIVE  
WESTON, FL 33327 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:** GLENN M COOPER

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** COOPER, GLENN M  
**Address:** 1222 SKYLARK DRIVE  
**City-St-Zip:** WESTON, FL 33327 US

**Title:** T  
**Name:** COOPER, SHARON B  
**Address:** 1222 SKYLARK DRIVE  
**City-St-Zip:** WESTON, FL 33327 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:** GLENN M COOPER

P

04/25/2011

Electronic Signature of Signing Officer or Director

Date