

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000004436

Entity Name: THERESA CAPONI, PA

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2623 OAKINGTON STREET  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

**Current Mailing Address:**

2623 OAKINGTON STREET  
WINTER GARDEN, FL 34787 US

**New Mailing Address:**

FEI Number: 20-4142014

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THORPE'S CONSULTING SYSTEMS, INC  
6327 PINEY GLEN LANE  
ORLANDO, FL 32819 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: CAPONI, THERESA  
Address: 2623 OAKINGTON STREET  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: TRES  
Name: CAPONI, PAUL  
Address: 2623 OAKINGTON STREET  
City-St-Zip: WINTER GARDEN, FL 34787 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: THERESA CAPONI

PRES

04/29/2012

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

\_\_\_\_\_  
Date