

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000021418

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** SOTTILE & COMPANY P.A.

**Current Principal Place of Business:**

4437 W. OKLAHOMA AVE.  
TAMPA, FL 33616 US

**New Principal Place of Business:**

3701 W. SWANN AVENUE  
TAMPA, FL 33609 US

**Current Mailing Address:**

4437 W. OKLAHOMA AVE.  
TAMPA, FL 33616 US

**New Mailing Address:**

3701 W. SWANN AVENUE  
TAMPA, FL 33609 US

**FEI Number:** 26-4416595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOTTILE, PAUL M  
4437 W. OKLAHOMA AVE.  
TAMPA, FL 33616 US

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

SOTTILE, PAUL M  
3701 W. SWANN AVENUE  
TAMPA, FL 33609 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

03/12/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SOTTILE, PAUL M  
Address: P.O. BOX 293  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: PAUL M. SOTTILE

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

PRES

03/12/2012

\_\_\_\_\_  
Date