

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000030595

FILED
Apr 26, 2012
Secretary of State

Entity Name: SOCIAL SECURITY DISABILITY ADVOCATE ASSOCIATES, INC.

Current Principal Place of Business:

22014 NW 14TH TERRACE
BROOKER, FL 32622 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5501
GAINESVILLE, FL 32627 US

New Mailing Address:

1511 NE 16TH AVENUE
D
GAINESVILLE, FL 32601 US

FEI Number: 45-1257432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, DEVERN Y
22014 NW 14TH TERRACE
BROOKER, FL 32622 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: WILSON, DEVERN Y
Address: 1511 NE 16TH AVENUE #D
City-St-Zip: GAINESVILLE, FL 32601

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: DEVERN Y. WILSON

P

04/26/2012

Electronic Signature of Signing Officer or Director

Date