

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000012389

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** GARY DAVID PALMER, P.A.

**Current Principal Place of Business:**

17971 BISCAYNE BLVD.  
SUITE 216  
AVENTURA, FL 33160 US

**New Principal Place of Business:**

19420 NE 19TH PLACE  
NORTH MIAMI BEACH, FL 33179 US

**Current Mailing Address:**

17971 BISCAYNE BLVD.  
SUITE 216  
AVENTURA, FL 33160 US

**New Mailing Address:**

19420 NE 19TH PLACE  
NORTH MIAMI BEACH, FL 33179 US

**FEI Number:** 65-0374431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLDBERG, ALAN  
17971 BISCAYNE BLVD.  
104  
AVENTURA, FL 33160 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: DPS  
Name: PALMER, GARY  
Address: 19420 NE 19TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: GARY PALMER

PRES

04/09/2012

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

\_\_\_\_\_ Date