

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S13091

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** KYNES, MARKMAN & FELMAN, P.A.

**Current Principal Place of Business:**

BOX 3396  
TAMPA, FL 33601

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 3396  
TAMPA, FL 33601

**New Mailing Address:**

**FEI Number:** 59-3036139      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MARKMAN, STUART C.  
100 S ASHLEY DR STE 1300  
TAMPA, FL 33602 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:** PD  
**Name:** MARKMAN, STUART C.  
**Address:** 100 S ASHLEY DR STE 1300  
**City-St-Zip:** TAMPA, FL 33602

**Title:** VSTD  
**Name:** FELMAN, JAMES E.  
**Address:** 100 S. ASHLEY DR STE 1300  
**City-St-Zip:** TAMPA, FL 33602

**Title:** V  
**Name:** YANES, KATHERINE EARLE  
**Address:** 100 S ASHLEY DR STE. 1300  
**City-St-Zip:** TAMPA, FL 33602

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: STUART C. MARKMAN

PD

01/17/2012

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

\_\_\_\_\_ Date