# DOCUMENT# H77535

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### Entity Name: HAYSKAR, WALKER, SCHWERER, DUNDAS & MCCAIN, P.A.

### **Current Principal Place of Business:**

% STEPHEN G. HAYSKAR, PRESIDENT 130 SOUTH INDIAN RIVER DRIVE SUITE 304 FORT PIERCE, FL 34950

## **Current Mailing Address:**

% STEPHEN G. HAYSKAR, PRESIDENT 130 SOUTH INDIAN RIVER DRIVE SUITE 304 FORT PIERCE, FL 34950 US

## FEI Number: 59-2579109

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

HAYSKAR, STEPHEN H 130 SOUTH INDIAN RIVER DRIVE SUITE 304 FORT PIERCE, FL 34950 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

## **Officer/Director Detail :**

Title	Ρ	Title	TD	
Name	HAYSKAR, STEPHEN G	Name	HAYSKAR, STEPHEN G.	
Address	% STEPHEN G. HAYSKAR, PRESIDENT 130 SOUTH INDIAN RIVER DRIVE SUITE 304	Address	% STEPHEN G. HAYSKAR, PRESIDENT 130 SOUTH INDIAN RIVER DRIVE SUITE 304	
City-State-Zip:	FORT PIERCE FL 34950	City-State-Zip:	FORT PIERCE FL 34950	
Title	S	Title	V	
Name	WALKER, JAMES T.	Name	SCHWERER, ROBERT V.	
Address	% STEPHEN G. HAYSKAR, PRESIDENT 130 SOUTH INDIAN RIVER DRIVE SUITE 304	Address	% STEPHEN G. HAYSKAR, PRESIDENT 130 SOUTH INDIAN RIVER DRIVE SUITE 304	
		0.4 0.4 7.		
City-State-Zip:	FORT PIERCE FL 34950	City-State-Zip:	FORT PIERCE FL 34950	

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.

BOOKKEEPER

# SIGNATURE: ROBIN C GREEN

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 08, 2014 Secretary of State CC9811702666

Certificate of Status Desired: No

Date