

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S04989

**FILED**  
**Jan 15, 2014**  
**Secretary of State**  
**CC0586053170**

**Entity Name:** EASTERN PROFESSIONAL MANAGEMENT CORPORATION

**Current Principal Place of Business:**

2467 MUIR CIRCLE  
WEST PALM BEACH, FL 33414

**Current Mailing Address:**

2467 MUIR CIRCLE  
WEST PALM BEACH, FL 33414

**FEI Number:** 65-0227093

**Certificate of Status Desired:** No

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

CAPASSO, JOSEPH  
2467 MUIR CIRCLE  
WELLINGTON, FL 33414 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

Date

**Officer/Director Detail :**

Title	P	Title	V
Name	CAPASSO, JOSEPH	Name	CAPASSO, SONJA
Address	2467 MUIR CIRCLE	Address	2467 MUIR CIR
City-State-Zip:	WELLINGTON, FL 33414	City-State-Zip:	WELLINGTON FL 33414

*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:** SONJA CAPASSO

V

01/15/2014

Electronic Signature of Signing Officer/Director Detail

Date