

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P38527

**Entity Name:** PEER CONSULTANTS, P.C.

**Current Principal Place of Business:**

888 17TH STREET, NW  
STE 850  
WASHINGTON, DC 20006

**Current Mailing Address:**

888 17TH STREET, NW  
STE 850  
WASHINGTON, DC 20006

**FEI Number:** 52-1135381

**Certificate of Status Desired:** Yes

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

ABRON, LILIA A  
1460 GULF BLVD.  
SUITE 1113  
CLEARWATER, FL 33767 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  
Name ABRON, LILIA A  
Address 1460 GULF BLVD. # 1103  
City-State-Zip: CLEARWATER FL 33767

Title V  
Name TUCKER JR., JOHN W.  
Address 12113 STONEY BOTTOM ROAD  
City-State-Zip: GERMANTOWN MD 20874

Title EO  
Name MCCADDEN, CAROLYN  
Address 424 FERNWOOD FARMS ROAD  
City-State-Zip: CHESAPEAKE VA 23320

Title V  
Name DAVIES-VENN, CHRISTIAN  
Address 18820 FALLING STAR ROAD  
City-State-Zip: GERMANTOWN MD 20874

*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:** LILIA A ABRON

**PRESIDENT**

**04/11/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date