

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 362976

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** LAURA B. HANCOCK, OF FT. PIERCE, INC.

**Current Principal Place of Business:**

854 21ST STREET  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

1840 TARPON LANE  
D-204  
VERO BEACH, FL 32960 US

**Current Mailing Address:**

854 21ST STREET  
VERO BEACH, FL 32960 US

**New Mailing Address:**

1840 TARPON LANE  
D-204  
VERO BEACH, FL 32960 US

**FEI Number:** 59-1292318      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

REEVES, BETTY  
854 21ST STREET  
VERO BEACH, FL 32960 US

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

REEVES, BETTY  
1840 TARPON LANE  
D-204  
VERO BEACH, FL 32960 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

04/28/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: REEVES, BETTY ANN  
Address: 1840 TARPON LANE D-204  
City-St-Zip: VERO BEACH, FL 32960

Title: VD  
Name: REEVES, BETTY ANN  
Address: 1840 TARPON LANE D-204  
City-St-Zip: VERO BEACH, FL

Title: SD  
Name: REEVES, BETTY ANN  
Address: 1840 TARPON LANE D-204  
City-St-Zip: VERO BEACH, FL 32960

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: BETTY REEVES

Electronic Signature of Signing Officer or Director

PTD

04/28/2011

Date