## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 456556** 

FILED Feb 17, 2012 Secretary of State

Entity Name: MCKEAN, PAUL CHRYCY & FLETCHER PROFESSIONAL ASSOCIATION

Current Principal Place of Business: New Principal Place of Business:

255 ALHAMBRA CIRCLE 2525 PONCE DE LEON BLVD

SUITE 900 SUITE 1040

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

255 ALHAMBRA 2525 PONCE DE LEON BLVD

SUITE 900 SUITE 1040

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US

FEI Number: 59-1539946 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FLETCHER, LARRY
255 ALHAMBRA CIRCLE
SUITE 900
CORAL GABLES, FL 33134 US

FLETCHER, LARRY
2525 PONCE DE LEON BLVD.
SUITE 1040
CORAL GABLES, FL 33134 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: 02/17/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: VP

Name: CHRYCY, JOEL R

Address: 2525 PONCE DE LEON BLVD., SUITE 1040

City-St-Zip: CORAL GABLES, FL 33134 US

Title: PD

Name: FLETCHER, LARRY A

Address: 2525 PONCE DE LEON BLVD, SUITE 1040

City-St-Zip: CORAL GABLES, FL 33134 US

Title: ST

Name: BYINGTON, JAMIE J

Address: 2525 PONCE DE LEON BLVD, SUITE 1040

City-St-Zip: CORAL GABLES, FL 33134 US

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: LARRY A. FLETCHER PRES 02/17/2012