

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 613621

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** H. CASSEDY SUMRALL, JR., PROFESSIONAL ASSOCIATION

**Current Principal Place of Business:**

355 NE 5TH AVENUE  
SUITE 8  
DELRAY BEACH, FL 334835542 US

**New Principal Place of Business:**

**Current Mailing Address:**

355 NE 5TH AVENUE  
SUITE 8  
DELRAY BEACH, FL 334835542 US

**New Mailing Address:**

**FEI Number:** 59-1897168

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUMRALL, H CASSEDY, JR  
355 N.E. 5TH AVE.  
SUITE 8  
DELRAY BEACH, FL 334835542 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SUMRALL, H CASSEDY JR  
Address: 510 MISSION HILL ROAD  
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: ST  
Name: SUMRALL, H. CASSEDY, JR.  
Address: 510 MISSION HILL ROAD  
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: V  
Name: THISTLE, JEFFREY J  
Address: 303 GROVE WAY  
City-St-Zip: DELRAY BEACH, FL 33444

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: H. CASSEDY SUMRALL, JR.

PRES

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date