

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 689398

Entity Name: CSPI, INC.

FILED  
Mar 19, 2012  
Secretary of State

**Current Principal Place of Business:**

5421 NORTH 59TH STREET  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

5421 NORTH 59TH STREET  
TAMPA, FL 33610

**New Mailing Address:**

FEI Number: 59-2029422

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

STOHLER, RICHARD L  
5421 NORTH 59TH STREET  
TAMPA, FL 33610 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: P/D  
Name: STOHLER, RICHARD L  
Address: 5421 NORTH 59TH STREET  
City-St-Zip: TAMPA, FL 33610

Title: V/D  
Name: STOHLER, RODNEY D  
Address: 5421 NORTH 59TH STREET  
City-St-Zip: TAMPA, FL 33610

Title: S/D  
Name: STOHLER, MARILYN R  
Address: 5421 NORTH 59TH STREET  
City-St-Zip: TAMPA, FL 33610

Title: VD  
Name: STOHLER, DOUGLAS A  
Address: 5421 NORTH 59TH STREET  
City-St-Zip: TAMPA, FL 33610

Title: VTAS  
Name: NELSON, ERIC K  
Address: 5421 NORTH 59TH STREET  
City-St-Zip: TAMPA, FL 33610

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: ERIC K. NELSON

VTAS

03/19/2012

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

\_\_\_\_\_  
Date