

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 693950

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** SOUTHERN INDEPENDENT TESTING AGENCY, INC.

**Current Principal Place of Business:**

138 A WHITAKER ROAD  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

138 A WHITAKER ROAD  
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number:** 59-2099805

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KEEL, C.J., JR.  
4950 W. KENNEDY BLVD., SUITE 603  
TAMPA, FL 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: KAUPP, CHARLES W JR  
Address: 17319 LINDA VISTA CIRCLE  
City-St-Zip: LUTZ, FL 33548

Title: STD  
Name: KAUPP, LINDA  
Address: 17319 LINDA VISTA CIRCLE  
City-St-Zip: LUTZ, FL 33548

Title: VP  
Name: KAUPP, BRIAN C  
Address: 6307 SONGBIRD WAY  
City-St-Zip: TAMPA, FL 33625

Title: VP  
Name: TRUSTY, STEVE  
Address: 1705 BLIND POND AVE.  
City-St-Zip: LUTZ, FL 33549

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: LINDA M. KAUPP

STD

01/10/2012

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

\_\_\_\_\_  
Date