

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F26227

FILED  
Jan 19, 2011  
Secretary of State

Entity Name: JAMES M. STARK, P.A.

## Current Principal Place of Business:

524 S ANDREWS AVE  
#304N  
FT LAUDERDALE, FL 33301 US

## Current Mailing Address:

524 S ANDREWS AVE  
#304N  
FT LAUDERDALE, FL 33301 US

## New Principal Place of Business:

524 S ANDREWS AVE  
#101N  
FT LAUDERDALE, FL 33301 US

## New Mailing Address:

524 S ANDREWS AVE  
#101N  
FT LAUDERDALE, FL 33301 US

FEI Number: 59-2084821

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STARK, JAMES M  
524 S ANDREWS AVE #304N  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

STARK, JAMES M  
524 S ANDREWS AVE #101N  
FT LAUDERDALE, FL 33301 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:

01/19/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP  
Name: JAMES M. STARK, P.A.  
Address: 524 S. ANDREWS AVE #101N  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: ST  
Name: JAMES M. STARK, P.A.  
Address: 524 S. ANDREWS AVE #101N  
City-St-Zip: FT LAUDERDALE,, FL 33301

Title: V  
Name: JAMES M. STARK, P.A.  
Address: 524 S. ANDREWS AVE #101N  
City-St-Zip: FT LAUDERDALE,, FL 33301

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: JAMES M. STARK

DP

01/19/2011

Electronic Signature of Signing Officer or Director

Date