

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G32781

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** THE LAW OFFICE OF THOMAS W. GARRARD, P.A.

**Current Principal Place of Business:**

520 E OLYMPIA AVE  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

306 E OLYMPIA AVE  
PUNTA GORDA, FL 33950 US

**Current Mailing Address:**

520 E OLYMPIA AVE  
324 CROSS STREET, SUITE A  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

306 E OLYMPIA AVE  
324 CROSS STREET, SUITE A  
PUNTA GORDA, FL 33950 US

**FEI Number:** 59-2278482

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARRARD, THOMAS W  
520 EAST OLYMPIA AVE  
PUNTA GORDA, FL 33950 US

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

GARRARD, THOMAS W  
306 EAST OLYMPIA AVE  
PUNTA GORDA, FL 33950 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:

01/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: GARRARD, THOMAS W.  
Address: 306 EAST OLYMPIA AVE  
City-St-Zip: PUNTA GORDA, FL 33950

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: THOMAS W. GARRARD

PST

01/04/2012

Electronic Signature of Signing Officer or Director

Date