

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G51374

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** PRIMARY PROPERTY MANAGEMENT, INC.

**Current Principal Place of Business:**

8687 W. IRLO BRONSON MEM HWY.  
SUITE 200  
KISSIMMEE, FL 34747

**New Principal Place of Business:**

**Current Mailing Address:**

8687 W. IRLO BRONSON MEM HWY.  
SUITE 200  
KISSIMMEE, FL 34747

**New Mailing Address:**

**FEI Number:** 59-2325175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VASON, ROBERT F JR, PA  
501 EAST FIFTH AVENUE  
MOUNT DORA, FL 32756 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: DV  
Name: WISE, KAREN P  
Address: 8687 W IRLO BRONSON MEM HWY, STE 200  
City-St-Zip: KISSIMMEE, FL 34747

Title: DVS  
Name: LEARY, TAMRA P  
Address: 8687 W IRLO BRONSON MEM HWY, STE 200  
City-St-Zip: KISSIMMEE, FL 34747

Title: DPT  
Name: WILLIAM, LEARY N  
Address: 8687 W IRLO BRONSON MEM HWY, STE200  
City-St-Zip: KISSIMMEE, FL 34747

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: WILLIAM N LEARY

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02/21/2012

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

\_\_\_\_\_  
Date