

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H07252

FILED
Jan 07, 2010
Secretary of State

Entity Name: WILLIAM R. NORTHCUTT, P.A.

Current Principal Place of Business:

C/O WILLIAM R. NORTHCUTT
2194 HWY A1A, STE 306
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM R. NORTHCUTT
2194 HWY A1A, STE 306
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: 59-2415854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTHCUTT, WILLIAM R.
2194 HWY A1A, STE 306
INDIAN HARBOUR BEACH, FL 32937 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT
Name: NORTHCUTT, WILLIAM R.
Address: 2194 HWY A1A, STE. 306
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: S
Name: NORTHCUTT, SIEGRID D
Address: 2194 HWY. A1A STE. 306
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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 R. NORTHCUTT

DPT

01/07/2010

Electronic Signature of Signing Officer or Director

Date