

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H59684

Entity Name: WALL SURGEONS, INC.

**FILED**  
**Feb 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

878 BENCHWOOD DR  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

878 BENCHWOOD DR  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

FEI Number: 59-2541216

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLAMARINO, PHILIP  
878 BENCHWOOD DR  
WINTER SPRINGS, FL 32708 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: P  
Name: COLAMARINO, PHILIP  
Address: 878 BENCHWOOD DR  
City-St-Zip: WINTER SPRINGS, FL 32708

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: JOSEPH UTCHEL

ACCT

02/01/2012

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

\_\_\_\_\_  
Date