

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H72169

Entity Name: OTC OF PINELLAS, INC.

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

21 2ND AV NE  
LARGO, FL 34770

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 315  
OZONA, FL 34660

**New Mailing Address:**

FEI Number: 59-2584816

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPONE, BRUCE  
333 PENNSYLVANIA AVE  
PALM HARBOR, FL 34683 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: DP  
Name: CAPONE, BRUCE E.  
Address: PO BOX 315  
City-St-Zip: OZONA, FL 34660

Title: V  
Name: CAPONE, ROBIN  
Address: PO BOX 315  
City-St-Zip: OZONA, FL 34660

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: ROBIN CAPONE

V

02/17/2010

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

\_\_\_\_\_  
Date