2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2011
Secretary of State

DOCUMENT# H77535

Entity Name: HAYSKAR, WALKER, SCHWERER, DUNDAS & MCCAIN, P.A.

Current Principal Place of Business:

% STEPHEN G. HAYSKAR, PRESIDENT
519 SOUTH INDIAN RIVER DRIVE
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

% STEPHEN G. HAYSKAR, PRESIDENT
519 SOUTH INDIAN RIVER DRIVE
FORT PIERCE, FL 34950

New Mailing Address:

% STEPHEN G. HAYSKAR, PRESIDENT
P.O. BOX 3779
FORT PIERCE, FL 34948

FEI Number: 59-2579109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAYSKAR, STEPHEN H
519 SOUTH INDIAN RIVER DRIVE
FORT PIERCE, FL 34950 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: HAYSKAR, STEPHEN G
Address: 519 S. INDIAN RIVER DR.
City-St-Zip: FORT PIERCE, FL 34950

Title: TD
Name: HAYSKAR, STEPHEN G.
Address: 519 S. INDIAN RIVER DR.
City-St-Zip: FORT PIERCE, FL 34950

Title: S
Name: WALKER, JAMES T.
Address: 519 S. INDIAN RIVER DR.
City-St-Zip: FORT PIERCE, FL 34950

Title: V
Name: SCHWERER, ROBERT V.
Address: 519 S. INDIAN RIVER DR.
City-St-Zip: FORT PIERCE, FL 34950

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: STEPHEN G. HAYSKAR PRES 01/14/2011

Electronic Signature of Signing Officer or Director — Date