2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2012
Secretary of State

DOCUMENT# J74055

Entity Name: PROFESSIONALS TRUST, INC.

Current Principal Place of Business:

398 CAMINO GARDENS BLVD
SUITE 206
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

2650 STATE ROAD 84
FT. LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 65-0061240 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAPOINTE, DR L L
2650 STATE ROAD 84
FT LAUDERDALE, FL 33312 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: DR.
Name: LAPOINTE, DR. LORA L.
Address: 398 CAMINO GARDENS BLVD.
City-St-Zip: BOCA RATON, FL 33432

Title: DR.
Name: LAPOINTE, DR. JOHN A.
Address: 2650 STATE ROAD 84
City-St-Zip: FT. LAUDERDALE, FL 33312

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: LORA LAPOINTE, PH.D. DR. 01/12/2012

Electronic Signature of Signing Officer or Director Date