

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J98798

**FILED**  
**Feb 03, 2011**  
**Secretary of State**

**Entity Name:** ROGER N. MESSER, P.A.

**Current Principal Place of Business:**

1555 ST. LUCIE WEST BLVD  
SUITE 202  
PORT SAINT LUCIE, FL 34986

**New Principal Place of Business:**

1555 ST. LUCIE WEST BLVD NW  
SUITE 202  
PORT SAINT LUCIE, FL 34986 US

**Current Mailing Address:**

1555 ST. LUCIE WEST BLVD  
SUITE 202  
PORT SAINT LUCIE, FL 34986 US

**New Mailing Address:**

1555 ST. LUCIE WEST BLVD NW  
SUITE 202  
PORT SAINT LUCIE, FL 34986 US

**FEI Number:** 65-0009583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MESSER, ROGER N  
1555 ST. LUCIE WEST BLVD  
SUITE 202  
PORT SAINT LUCIE, FL 34952 US

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

MESSER, ROGER N  
1555 ST. LUCIE WEST BLVD NW  
SUITE 202  
PORT SAINT LUCIE, FL 34986 US

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:

02/03/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: MESSER, ROGER N  
Address: 1172 SW MIRROR LAKE COVE  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: D  
Name: MESSER, STEVEN A  
Address: 301 NE GREENBRIAR AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

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: ROGER N. MESSER

PSTD

02/03/2011

Electronic Signature of Signing Officer or Director

Date