

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K88115

FILED  
Jan 12, 2011  
Secretary of State

Entity Name: JAMES M. NICHOLAS, P.A.

**Current Principal Place of Business:**

1790 HWY A1A  
STE 202  
SATELLITE BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

1790 HWY A1A  
STE 202  
SATELLITE BEACH, FL 32937 US

**New Mailing Address:**

FEI Number: 59-2947273      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NICHOLAS, JAMES M.  
1790 HWY A1A  
STE 202  
SATELLITE BEACH, FL 32937 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: DP  
Name: NICHOLAS, JAMES M.  
Address: 1790 HWY A1A STE 202  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: ST  
Name: NICHOLAS, JAMES M.  
Address: 1790 HWY A1A STE 202  
City-St-Zip: SATELLITE BEACH, FL 32937

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: JAMES M. NICHOLAS

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

DP

01/12/2011

\_\_\_\_\_ Date