

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36702

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** COUNTRYMAN & ASSOCIATES, P.A., CPA

**Current Principal Place of Business:**

16011 NEBRASKA AVE NORTH  
SUITE 106  
LUTZ, FL 335496158 US

**New Principal Place of Business:**

**Current Mailing Address:**

16011 NEBRASKA AVE NORTH  
SUITE 106  
LUTZ, FL 335496158 US

**New Mailing Address:**

**FEI Number:** 59-2981184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COUNTRYMAN, JOHN A  
16011 NEBRASKA AVE NORTH  
SUITE 106  
LUTZ, FL 33549 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: DPS  
Name: COUNTRYMAN, JOHN A  
Address: 16011 NEBRASKA AVE. NORTH, STE 106  
City-St-Zip: LUTZ, FL 33549 US

Title: DT  
Name: COUNTRYMAN, SANDRA K  
Address: 16011 NEBRASKA AVE. NORTH, STE 106  
City-St-Zip: LUTZ, FL 33549 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: JOHN A. COUNTRYMAN

P

04/25/2012

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

\_\_\_\_\_  
Date