

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L50473

FILED  
May 02, 2012  
Secretary of State

Entity Name: MCFANN & BEAVERS, P.A.

**Current Principal Place of Business:**

C/O ROBERT J. MCFANN  
110 S.E. 6TH STREET, SUITE 1900  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ROBERT J. MCFANN  
110 S.E. 6TH STREET, SUITE 1900  
FORT LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 65-0176022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCFANN, ROBERT J.  
110 S.E. 6TH STREET  
SUITE 1900 - 110 TOWER  
FORT LAUDERDALE, FL 33301 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: D  
Name: MCFANN, ROBERT J.  
Address: 110 S.E. 6TH ST., #1900  
City-St-Zip: FORT LAUDERDALE, FL

Title: D  
Name: BEAVERS, TIMOTHY  
Address: 110 S.E. 6TH ST., #1900  
City-St-Zip: FORT LAUDERDALE, FL

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: ROBERT J. MCFANN

D

05/02/2012

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

\_\_\_\_\_  
Date