

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L53155

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** BETTY W. KELLY, CERTIFIED PUBLIC ACCOUNTANT, P.A.

**Current Principal Place of Business:**

% BETTY W. KELLY  
843 N WOODLAND BLVD SUITE 2  
DELAND, FL 327202759 US

**New Principal Place of Business:**

843 N WOODLAND BLVD  
SUITE 2  
DELAND, FL 327202759 US

**Current Mailing Address:**

% BETTY W. KELLY  
843 N WOODLAND BLVD SUITE 2  
DELAND, FL 327202759 US

**New Mailing Address:**

843 N WOODLAND BLVD  
SUITE 2  
DELAND, FL 327202759 US

**FEI Number:** 59-2986033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KELLY, BETTY W.  
843 N WOODLAND BLVD SUITE 2  
SUITE 2  
DELAND, FL 327202759 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: PSTD  
Name: KELLY, BETTY W.  
Address: 807 BAY TREE CIR  
City-St-Zip: DELAND, FL 327241203 US

Title: VPD  
Name: KELLY, WILLIAM C  
Address: 807 BAY TREE CIRCLE  
City-St-Zip: DELAND, FL 327241203 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: BETTY W KELLY

PRES

01/05/2012

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

\_\_\_\_\_  
Date