

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000042237

Entity Name: DISQUE & SCHWAB, P.A.

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

192 NW CENTRAL PARK PLAZA  
ST. LUCIE WEST, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

192 NW CENTRAL PARK PLAZA  
ST. LUCIE WEST, FL 34986

**New Mailing Address:**

FEI Number: 65-1004433

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DISQUE, CURTIS  
192 NW CENTRAL PARK PLAZA  
ST. LUCIE WEST, FL 34986 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: P  
Name: DISQUE, CURTIS  
Address: 192 N.W. CENTRAL PARK PLAZA  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VP  
Name: SCHWAB, CHARLES  
Address: P.O. BOX 880295  
City-St-Zip: PORT ST. LUCIE, FL 34988

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: CURTIS L. DISQUE

PRES

01/21/2011

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

\_\_\_\_\_  
Date